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ABSTRACT

The booklet discusses the school social worker and the handicapped child, with special reference to the Education for All Handicapped Children Act (P.L. 94-142). A brief overall description of P.L. 94-142 and its effect on school social work practice is provided. The theme of the relation of school social work practice and P.L. 94-142 is developed and continued throughout the booklet in specific, topical chapters on aspects of the school social worker's role and its relation to the law. Aspects covered include decision making and design for delivery of services: the individualized education program (IEP): referral, evaluation, placement: multidisciplinary teams: working directly with parents: parents' expectations of social workers: the least restrictive environment: and resource acquisition and community coordination. Whenever possible, the exact wording of the law is used and cited for easy reference. Sample IEP forms and a flow chart illustrating the identification of high risk students are appended. (DLS)

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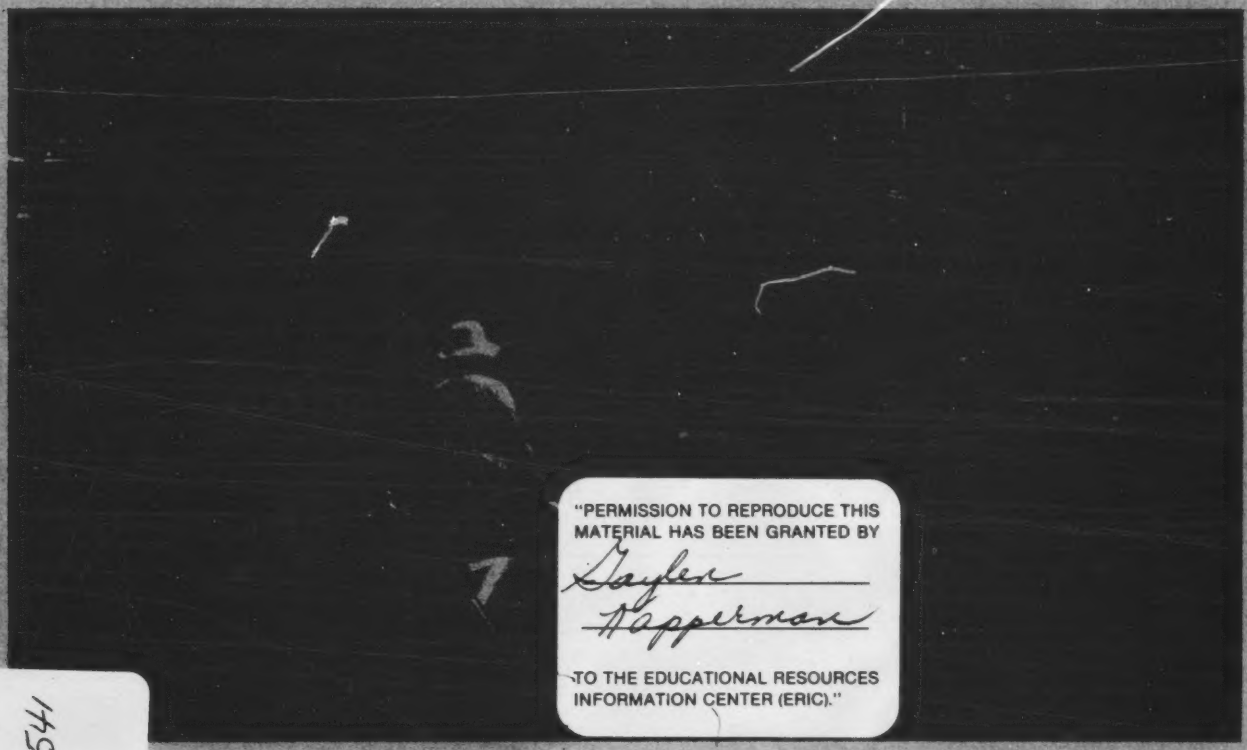

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This document was proposed, published and disseminated by the Illinois Regional Resource Center (U.S.O.E., B.E.H., Contract #300 78 0012) as a service to the parents and schools of the State of Illinois. The information offered herein has been extensively reviewed in order to assure accuracy. However, legal opinion and State and Federal statutes continually evolve as a result of litigation and legislation. Therefore, some points made in this draft may be at variance with more recent interpretations.

This book is a product of the shared concerns of a group of school social workers who met on a regular basis to attempt to define the changing parameters of the school social worker's role in response to P.L. 94-142. The book is a product of discussions and ideas freely interchanged over a series of long winter afternoons. Not all members of the group were in a position to contribute a paper but the book reflects their thinking and tested experiences as surely as that of the authors. It is our shared hope that this discussion will stimulate the further development of the contribution of the school social worker to the welfare of children in school settings.

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School Social Workers have an opportunity with P.L. 94-142 to change the image of Social Work in the schools as well as make an effective positive impact on the education of children with handicapping conditions. Active attention must, as always, be given to parents and their needs, but new dimensions have come on to the horizon with this legislation.

The challenge for the field of social work is clearly highlighted by the authors of this book. Precise information regarding legislation, due process procedures, individual educational programs, teaming, least restrictive environment, community and parent involvement are all pertinent areas addressed in individual chapters. School Social Workers, pupil personnel and parents will receive concrete information from the content as well as numerous dynamic conceptualizations crystallized on the application of Social Work Services.

None will find easy answers or a cook book approach as the thrust is a professional one. This is necessary at this juncture as great demands will be placed on social workers' professional skills.

Education and social work have been given the structure through P.L. 94-142 to create a learning environment for children that holds hope and promise. The building blocks and ingredients must be added by personnel such as School Social Workers who are inspired to perform their tasks. The authors of **The School Social Worker and the Handicapped Child: Making P.L. 94-142 Work** have added specifics, knowledge, formulas, and inspiration.

Social workers must be the force which helps meld the whole school experience into a positive, cohesive, predictable structure for school personnel, parents, and children. Their expertise will be enhanced by the reading of **The School Social Worker and the Handicapped Child: Making P.L. 94-142 Work.**

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and Mediations
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Preface

American public schools must now provide a free, appropriate public education with procedural safeguards to all children regardless of profoundity of handicap. This right, first enunciated in several court decisions in the early 1970's,[1] was gradually specified in the Vocational Rehabilitation Act of 1973,[2] The Education of All Handicapped Children Act,[3] the Federal Regulations implementing both federal laws,[4,5] and in state regulations as they are being revised to reflect the federal legislation. The process, which has taken nearly a decade, is now resulting in education being provided a group which has historically been unserved and underserved by the schools. Changes are now taking place in American education. Traditional roles are shifting to accomodate new mandates and teamwork processes. Educational programs are being developed to meet the individual learning needs of handicapped children, and parents are now involved in the process. Not only must the school give lip service to the legal rights of its constituents, its accountability to these rights is now quite specific and the law provides an important framework for practice with handicapped children.

School social workers have a most important role in making it possible for schools to fulfill these mandates. The social worker has long experience in developing an individualized approach to children with special needs, working with children and with their parents, coordinating community resources and providing consultation to educators on the relation between educational program and social and emotional needs of children. This experience is precisely in the areas where innovative approaches from the school are most needed.

The book is written for four populations. It is first of all dedicated to social workers who currently practice in the schools. For these, the book should provide the opportunity to identify their essential contribution to implementation of P.L. 94-142 and to match the multifaceted practice they already know with the requirements of the law. For social workers in the schools, the book seeks to match skills and practice already well developed with the particular needs of the school under this legislation.

School personnel, teachers and administrators, are a second population this book wishes to reach. Little introduction to the mandates of P.L. 94-142 is needed for these. Rather, the book would provide a deeper appreciation of what the social worker has to offer the school in its effort to meet these mandates. There is a dearth of literature on what school social workers actually do. For the administrator whose picture of the school social worker has been limited to counseling children or working with parents, there may be a number of surprises. Here the book seeks to match an understanding of the mandates of P.L. 94-142 with a deepened understanding of the multifaceted contribution of the school social worker.

The third population is students in schools of social work. Students traditionally learn social work methods and then test them out in particular fields of practice. Only recently have they begun to consider the interrelationship between methods and fields of practice and the differences which are derived from this interaction. There is little learning material available which presents the school social worker's role in its relation to a broader social purpose in the education institution and the law. The book is a beginning step to fill a vacuum in available materials.

Finally, we would like parents to become acquainted with these pages. We would like parents to know what school social work could offer them and their children. Parents may also be surprised at the many things a school social worker does and the ways they can assist in making education possible for a child.

The first two chapters provide a brief overall description of the law and its effect on school social work practice. The theme of the relation of school social work practice and the law is developed and continued throughout the book in specific, topical chapters on aspects of the school social worker's role and its relation to the law. Whenever possible, the exact wording of the law is used and cited for easy reference. While the book builds on a model of school social work practice which has been long in use, it goes a distance beyond that model to the further integration of practice with the law and its mandates. In this sense, the book seeks an understanding of social work practice which has breadth, depth and substance, is related to individual and institutional realities and is able to bring these realities together for the maximum realization of human potential.

CHAPTER I

The Education of All Handicapped Children Act of 1975 and the School Social Worker

Robert Constable and Marguerite Tiefenthal

The Education of All Handicapped Children Act, P.L. 94-142, is perhaps the most important school legislation to be passed since the Elementary and Secondary Education Act. A "bill of rights for the handicapped," the act will have profound effects on American education. It will also have profound effects on the provision of school social work services and consequently on the school social worker. To move along the path suggested by the law is to accommodate change and, in return, to contribute substantially to a long revolution in public education. To ignore the law's challenge is to elect a position of marginality in American education and virtually assure that functions typically served by school social workers will eventually be carried out by other professionals in the schools.

The right to an education for all children was clearly established in court decisions in the early 1970's and was formally declared in the Vocational Rehabilitation Act of 1973, Section 504. However, this right is more expressly stated in P.L. 94-142. The act mandates the right to a free, appropriate, public education for every child regardless of handicap and spells out the accountability and procedural safeguards which will insure this right. To insure fairness and to safeguard the rights of all involved, specific due process procedures have been built into the law. These procedural safeguards assure that parents be included as important advocates of the child's rights.

The act itself requires a written **Individualized Education Program** (IEP) to be developed for every handicapped child who receives special education and related services. The IEP constitutes an agreement between representatives of the school system and parents. The IEP states what will be provided for the child, who will provide it, and the effective dates of service. The act describes the Individualized Education Program as:

> A written statement for each handicapped child developed in any meeting by a representative of the local educational agency or an intermediate educational unit who shall be qualified to provide, or supervise the provision of, specially designed instruction to meet the unique needs of handicapped children, the teacher, the parents or guardians of such child, and whenever appropriate, such child, which statement shall include: (a) a statement of the present levels of educational performance of such child; (b) a statement of annual goals, including short-term instructional objectives: (c) a statement of the specific educational services to be provided to such child, and the extent to which such child will be able to participate in regular educational programs; (d) the projected date for initiation and anticipated duration of such services, and appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether instructional objectives are being achieved.[6]

The Individualized Education Program thus becomes a central management tool for ensuring accountability and compliance with the purposes of the act. The IEP is more than simply a plan, it is a statement of what resources will actually be provided for a child. It is possible that the school district may not have the resources to provide an appropriate education for the child. If this is the case, the school is obligated to purchase the needed educational services from outside. In this case, "resources" may mean more than what the school is able to offer within its walls.

In order to comply with the law each state must develop a state plan, a document which carefully describes how the state will comply with the requirements of the law.[7] The federal government will fund excess costs to the extent of a percentage of the national average per pupil expenditure. The percentage, 5% for Fiscal Year 1978, increases to 10% for Fiscal Year 1979; 20% for Fiscal Year 1980, 30% for Fiscal Year 1981, and 40% for Fiscal Year 1982 and thereafter.[8]

P.L. 94-142 will have a profound effect on social work as it is practiced in both regular and special education. In many ways the act dictates what school social workers have struggled to institute during their many years of involvement in education. The law makes an appropriate education for handicapped children a matter of right rather than privilege. It mandates a maximum level of parental participation in the education of the child and in decisions regarding the child. In its due process provisions, the law creates a child advocacy function which, whether fulfilled within or outside the school system, will be a required activity for many years to come. The act mandates a multidisciplinary team approach to the education of the child and thereby creates a concept of service delivery that is broader than that encompassed by any single profession. Potentially, this law places the school at the center of service integration, coordination, and funding for services to the handicapped child, since the school supervises the education of children regardless of the site of learning.

In order to be eligible for P.L. 94-142 funding, the child or youth must be indentified in one of the categories of handicapping conditions written into the regulations, namely:

> Those children evaluated as being mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, other health impaired, deaf-blind, multihandicapped, or as having specific learning disabilities, who because of these impairments need special education and related services.[9]

Further examination of the law makes clear that school social work is defined as a "related service".[10] Related services are those additional services required to assist a child to benefit from special education.[11] Special education is unique instruction designed to meet a child's educational needs. The definition makes it very clear that "related services" draw their legitimacy from the extent to which they make education possible for the child, not from a general desirability of having social services. School social work is thus placed in a position where it must define its legitimacy in relation to the process of education if social work services are to qualify for P.L. 94-142 funding. The Education of All Handicapped Children Act does not reduce the need for the school social worker's traditional skills of interviewing, diagnosis, consultation and advocacy. Each of these skills has a very specific and important function in relation to the law. Actually, the school now has an even greater need to use the skills of the social worker than ever before.

If social workers and educators do not respond to the challenge, the picture is considerably less optimistic. The act's many requirements could complicate the delivery of educational services, so that, rather than a step forward, it could restrict service provision[12] and increase paperwork. The law faces massive problems in implementation[13] if people are not prepared to understand or carry out its mandates.

The purpose of the following chapters is to outline the effect of P.L. 94-142 on social work services in the schools. The mandated components of P.L. 94-142 may initiate a revolution in education and also in social work practice in the schools. The impact of these mandated components will be felt as an expansion of role responsibility for the school social worker, but along with this impact on school social work practice will come a parallel change in patterns of service delivery in the schools. Changes in the role of the school social worker and in school social work practice are bound to stem from: (a) the protections of rights which stem from due process; (b) the shift in decision making and accountability toward the multidisciplinary team; (c) the legal involvement of parents in the setting of goals and objectives be identified clearly, collaboratively, and in assessable form; and (d) the demand for a Least Restrictive Environment for the child. We will now look at each of these mandates in some detail.

The Protections of Rights Which Stem From Due Process

Social Workers have long held deep convictions about children's rights and have often acted on these convictions in their work with individual children and school systems. In the absence of societal backing for these convictions, they remained individual to the social worker and identified with the profession. They could not be translated into general policies. There are no safeguards for rights not yet acknowledged. As rights become a matter of policy, safeguards for these rights can be instituted for every child. All other changes in social work and in education stem from the acknowledgement of the rights and their consequent due process protections. Each envisaged change, in itself, poses little novelty. All of these together, based on acknowledged rights, could accomplish profound changes in practice, changes which were not possible in the world of the school as we have known it.

For handicapped children, the implications of this law are comparable to the effect of the school attendance laws on American secondary education at the turn of the century. In order to carry out the intent of the law, the social worker may be placed in the position of becoming a mediator between the home and the school. Such a role will involve a shifting of the focus of the social worker to include the child's entitlements to appropriate resources as well as dealing with individual children's problems in the school. The role will doubtless involve some conflict in that special education providers may find it difficult to conform to some of the new requirements and parents may hesitate to avail themselves of the provisions of the law.

The Shift in Decision Making and Accountability Toward a Multidisciplinary Team

The multidisciplinary team concept, while not a new concept, somewhat counterbalances the growing isolation of specialists in the schools. Under P.L. 94-142 specialization continues, but within a framework of common goals, integrated decision making, and understanding of each other's roles. A traditionally hierarchical and segmented decision making structure in the school is now counterbalanced by the team. Social work practitioners face the prospect of either becoming an in-

tegral part of the multidisciplinary team or accepting a position of marginality, and perhaps ultimately, exclusion. School social work can no longer be seen as an isolated effort. This shift toward a multidisciplinary team creates a new focus as part of a team which must resolve its internal disagreements in order to maximize educational opportunities for the child.

Parental Involvement in the Formulation of Goals and Objectives

The implications of mandated parental involvement in decision making recall a long held conviction by social workers regarding the need for a better relationship between home and school. No professional working in the school has had as much experience and contact with parents as the school social worker. However, the traditional liaison role with parents undergoes a change when the parent becomes a collaborator (with due process protection) in the evaluation of the child's needs, and the program and services to meet those needs. Responsibility for educational planning shifts to include the parent and the role of the educator shifts from making independent program decisions to coordinating the goals and efforts of **home and school.** The role that emerges for parents is one of collaborator in maximizing the conditions necessary for the social and educational development of the child. Parents of the handicapped will increasingly avail themselves of the opportunity to gain access to the school to the fullest extent possible. With improved communication networks, parents will become quite sophisticated in asking for better programming for their children. An alliance between parents and the school could lead to a deepening support of the school by parents of handicapped children. The enhanced role of parents as genuine collaborators and partners creates a new type of relationship and ultimately implies a different style of school social work practice.

The Demand that Goals and Objectives be Identified Clearly, Collaboratively, and in Assessable Form

While the demand that we clearly identify goals and objectives may seem fairly simple, it is perhaps the most professionally challenging provision of the act. The task of identification and clarification of goals and objectives cannot be identified in general terms. They cannot be simply what we plan to do. They must be identified as specific terminal behaviors of the child.

Another dimension to the definition of goals and objectives comes from social work's position in the educational setting itself. The justification for social work intervention is related to its ability to help the school accomplish its educational function. This function is quite clearly spelled out by the Supreme Court in **Brown vs. Board of Education:**

> If education is a principle instrument in helping the child to adjust normally to his environment, it is doubtful that any child may reasonably be expected to succeed in life if he is denied the opportunity of an education. The opportunity of an education, where the state has undertaken to provide it to any, is a right which must be made available to all on equal terms.[14]

Assuming that the definition of "education" used, particularly in the case of handicapped children, is broader than the purely academic definition and involves preparation for life, then the strongest argument for school social work is that it helps make education possible. The development of social skills--social acceptance, responsibility, self-control, self-concept, general behavior and self-help skills[15]--are translated into educational goals for handicapped children. They are not soley the private province of the social worker, but the social worker will make a most significant contribution to this area. In this respect, the social worker's function is clearly related to the educator's. The goals and objectives to which the social worker can contribute are primarily educational goals, but they cannot be isolated from a social context which gives them meaning and value and makes them feasible and worthwhile for particular children in particular like circumstances. The demand that we think through the relation of social work to education could have a profoundly beneficial effect on the clarity and contribution of school social work practice.

The Least Restrictive Environment

One of the best known aspects of P.L. 94-142 is that of the **Least Restrictive Environment.** The provision in the act assures that:

> to the maximum extent appropriate handicapped children, including children in public and private institutions or other care facilities are educated with children who are not handicapped, and that special classes, separate schooling, or other removal of handicapped children from the regular educational environment occurs only when the nature or severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.[16]

The institution of the Least Restrictive Environment has three major implications for the school social worker. First and foremost, the isolation and stigma previously experienced by handicapped children is to be minimized whenever possible. Thus, the separation of special education from regu-

lar education will be less easily justified and maintained. In school systems where the social worker had primarily served special education programs, the role of the social worker will need to be redefined in relation to both special and regular education.

Secondly, the social worker can make an important contribution to the design of a Least Restrictive Environment. As an expert in human social functioning, the social worker has the background to participate in assessing the pupil's level of functioning within the different environments and make recommendations regarding what services will be needed to support each placement.

Finally, as the child moves into a less restrictive environment, the school social worker's clinical skills will be needed by the child, the parents and by the teachers. The institution of the Least Restrictive Environment will of necessity make greater demands upon these skills and create a new utilization for the social work role.

The School Social Worker as Service Integrator

The impact of P.L. 94-142 on the role of the social worker as discussed is paralleled by a forthcoming change in the patterns of service delivery to children in schools. The Individualized Education Program is ultimately a statement of the resources required to carry out a plan. Availability of these resources will probably be limited and considerable ingenuity may be needed to plan appropriately. It is likely that coordination with educational resources outside the school systems may be required, with the school system paying for these services in some cases. Any purchase of service by the school may bring funding, contracting, and accountability issues directly into the purview of the multidisciplinary team. The social worker may thus take on some responsibility for coordination, service integration, and monitoring of a variety of services to assist in the education of the handicapped child.

The chapters following examine the law and discuss each of the changes in patterns of service delivery and in social work practice which are expected to result from the Education of All Handicapped Children Act.

CHAPTER II

P.L. 94-142 and Its Regulations

David Moorman, Vaughn Morrison, and Marguerite Tiefenthal

This chapter reviews the provisions of Public Law 94-142 for the evaluation of handicapped children, delivery of special education services, due process hearing procedures, parent participation, accountability, and other facets of the education of handicapped children. The law is quite comprehensive and specific (the rules and regulations for its implementation cover 49 pages of the **Federal Register** with fine print.[17]). We can only scratch the surface here. To be fully informed, you should obtain your own copy. The more you know about the letter and spirit of the law, the greater impact you can have on its implementation.

As you read more of the law, you will realize that many sections are open to a variety of interpretations. Over the next few years, many of these amibiguities will be clarified in courts of law. But in the meantime, it is best to keep the purpose of the law in mind, and to examine the interpretations of the law in this light.

The Purpose of P.L. 94-142

The intent of the law is to see that in all cases handicapped children receive a free, appropriate, public education which allows them to develop their abilities. By law, handicapped children can no longer be ignored or underserved. Special educational services and related services must be provided.

Specifically, the purpose of the act is:

1. to insure that all handicapped children have available to them a free, appropriate, public education which includes special education and related services to meet their unique needs;
2. to insure that the rights of handicapped children and their parents are protected;
3. to assist states and localities to provide for the education of all handicapped children; and
4. to assess and insure the effectiveness of efforts to educate those children.[18]

The Handicapped Child

The act defines "handicapped children" as:

> Those children evaluated . . . as being mentally retarded, hard of hearing, deaf, speech impaired, visually handicapped, seriously emotionally disturbed, orthopedically impaired, other health impaired, deaf-blind, multihandicapped, or as having specific learning disabilities, who because of those impairments need special education and related services.[19]

Seriously Emotionally Disturbed Children

Public Law 94-142 makes provision for handicapped conditions and each of these conditions is defined separately. One definition of particular significance to school social workers is "seriously emotionally disturbed." This term is defined as a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, which adversely affects educational performance:

(a) An inability to learn which cannot be explained by intellectual sensory, or health factors;
(b) An inabilty to build or maintain satisfactory interpersonal relationships with peers and teachers;
(c) Inappropriate types of behavior or feelings under normal circumstances;
(d) A general pervasive mood of unhappiness or depression; or
(e) A tendency to develop physical symptoms or fears associated with personal or school problems.[20]

Children who are mentally or physically impaired and who face the chronic stress of being handicapped in a competitive world which values "normality" can easily become depressed and fail in relationships with others. Such children need our support and skill in accessing the resources they need to the greatest extent possible.

Special Education

According to P.L. 49-142, "special education" means:

Specially designed instruction, at no cost to the parent, to meet the unique needs of a handicapped child, including classroom instruction, instruction in physical education, home instruction, and instruction in hospitals and institutions. The term includes speech pathology, or any other related service, if the service consists of specially designed instruction, at no cost to the parents, to meet the unique needs of a handicapped child, and is considered "special education" rather than a "related service" under State standards.[21]

"A child is not handicapped unless he or she needs special education." The definition of "related service" also depends on this definition, since a related sevice must be necessary for a child to benefit from special education. Therefore, if a child does not need special education, there can be no "related services" and the child (because not "handicapped") is not covered under the act.[22]

Related Service

The term "related services" means transportation and such developmental, corrective and other supportive services as are required to assist a handicapped child to benefit from special education, and includes speech pathology and audiology, psychological services, physical and occupational therapy, recreation, early identification and assessment of disabilities in children, counseling services, and medical services for diagnostic or evaluation purposes. The term also includes[23] school health services, social work services in schools, and parent counseling and training.[24]

"Social Work services in schools" include:

1. Preparing a social or developmental history on a handicapped child;
2. Group and individual counseling with the child and family;
3. Working with those problems in a child's living situation (home, school, and community) that affect the child's adjustment in school; and
4. mobilizing school and community resources to enable the child to receive maximum benefit from his or her educational program.[25]

Special Education "At No Cost" to Parents

"At No Cost" means that all specially designed instruction is provided without charge, but does not preclude incidental fees which are normally charged to non-handicapped students or their parents as part of the regular education program.[26]

This is an issue which will need further clarfication from the courts.

Evaluation

P.L. 94-142 is quite specific in requiring a complete, multi-faceted, nondiscriminatory evaluation. Testing and evaluation materials and procedures used for the purposes of evaluation and placement of handicapped children must be selected and administered so as not to be racially or culturally discriminatory [27]

Preplacement Evaluation:

Before any action is taken with respect to the initial placement of a handicapped child in a special education program, a full and individual evaluation of the child's educational needs must be conducted in accordance with the requirements (stated below)[28]

Evaluation Procedures mean:

State and local educational agencies shall insure, at a minimum that

(a) Tests and other evaluation materials:

(1) are provided and administered in the child's native language or other mode of communication, unless it is clearly not feasible to do so;

(2) have been validated for the specific purpose for which they are used; and

(3) are administered by trained personnel in conformance with the instructions provided by their producer;

(b) Tests and other evaluation materials include those tailored to assess specific areas of educational need and not merely those which are designated to provide a single general intelligence quotient;

(c) Tests are selected and administered so as best to insure that when a test is administered to a child with impaired sensory, manual, or speaking skills, the test results accurately reflect the child's aptitude or achievement level or whatever other factors the test purports to measure, rather than reflecting the child's impaired sensory, manual, or speaking skills (except where those skills are the facets which the test purports to measure);

(d) No single procedure is used as the sole criterion for determining an appropriate educational program for a child;

(e) The evaluation is made by a multidisciplinary team or group of persons, including at least one teacher or other specialist with knowledge in the area of suspected disability;and

(f) The child is assessed in all areas related to the suspected disability, including, where appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities.[29]

Although the law implies that not every child need be assessed in all areas, there are some areas which must be checked with every student, such as vision and hearing. The stress of a handicapping condition would generally dictate that some social and emotional evaluation may be necessary.

Provisions for the Independent Evaluation

Parents have the right to an independent educational evaluation, and under certain conditions, this may be carried out at public expense:

> A parent has the right to an independent educational evaluation at public expense if the parent disagrees with an evaluation obtained by the public agency. However, the public agency may initiate a hearing . . . to show that it's evaluation is appropriate. If the final decision is that the evaluation is appropriate, the parent still has the right to an independent educational evaluation, but not at the public expense.[30]

If the parent obtains an independent educational evaluation at private expense, the results of the evaluation:

(a) must be considered by the public agency in any decision made with respect to the provision of a free, appropriate public education to the child, and
(b) may be presented as evidence at a hearing under this subpart regarding that child.[31]

Thus, the parents are guaranteed that results of an independent evaluation will be considered by the school in the evaluation of their child. This is a natural outcome, since P.L. 94-142 came into being as the result of many parents' frustration in their attempts to obtain an appropriate education for their handicapped children. The bill's origin in parent concerns and child advocacy comes through strongly in this procedural safeguard.

Placement Procedures

In interpreting evaluation data in making placement decisions, each public agency shall:

1. Draw upon information from a variety of sources, including adaptive and achievement tests, teacher recommendations, physical condition, social or cultural background, and adaptive behavior.
2. Insure that information obtained from all of these sources is documented and carefully considered;
3. Insure that the placement decision is made by a group of persons including persons knowledgeable about the child, the meaning of the evaluation data, and the placement options; and
4. Insure that the placement decision is made in conformity with the least restrictive environment rules . . .
5. If a child . . . needs special education and related services, an individualized education program must be developed for the child . . .[32]

Multidisciplinary Team

As mentioned in the Placement Procedures above (#3), the placement decisions are made by a multidisciplinary team or group of persons including persons knowledgeable about the child, the meaning of the evaluation data and the placement options. The basic procedure which public agencies are required to use in evaluating all handicapped children requires that . . . the evaluation be done by a multidisciplinary team . . .[33]

Meetings

It is assumed that the multidisciplinary team would meet to decide on the need for special education and related services for the child who had been evaluated. However, each public agency is responsible for initiating and conducting meetings for the purpose of developing, reviewing, and revising a handicapped child's individual education program.[34]

The meeting to develop a child's "individualized education program" . . . must be held within 30 calendar days of the determination that the child needs special education and related services.[35] The following guidelines specify who may participate in the multidisciplinary staff conferences.

> (a) General. The public agency shall insure that each meeting includes the following participants:
> (1) a representative of the public agency, other than the child's teacher, who is qualified to provide, or supervise the provision of special education,
> (2) the child's teacher,
> (3) one or both of the child's parents . . .,

(4) the child, where appropriate,
(5) other individuals at the discretion of the parent or agency.

(b) Evaluation personnel. For a handicapped child who has been evaluated for the first time, the public agency shall insure:
(1) that a member of the evaluation team participates in the meeting, or
(2) that the representative of the public agency, the child's teacher, or some other person is present, who is knowledgeable about the evaluation procedures used with the child and is familiar with the results of the evaluation.[36]

Each public agency is responsible for initiating and conducting meetings . . . to develop, review, and revise each child's IEP. A meeting must be held for this purpose at least once a year.[37]

What If Neither Parent Can Attend?
The school must make a good faith ef′ t to see that at least one parent comes to the meeting.

(a) Each public agency shall take steps insure that one or both of the parents of the handicapped are present at each meeting or afforded the opportunity to participate, including:
(1) notifying parents of the meeting early enough to insure that they will have an opportunity to attend; and
(2) scheduling the meeting at a mutually agreed upon time and place.

(b) The notice under paragraph (a) (1) of this section must indicate the purpose, time and location of the meeting, and who will be in attendance.

(c) If neither parent can attend, the public agency shall use other methods to insure parent participation, including individual or conference telephone calls.

(d) A meeting may be conducted without a parent in attendance if the public agency is unable to convince the parents that they should attend. In this case, the public agency must have a record of its attempts to arrange a mutually agreed on time and place . . .

(e) The public agency shall take whatever action is necessary to insure that the parents understand the proceedings at a meeting including arranging for an interpreter for parents who are deaf or whose native language is other than English.[38]

Note that the meeting is at a "mutually agreeable" time and place and that the parents need not come if they are determined not to do so.

Parents' Right to Review Evaluation Material
The parents have a right to review the evaluation material prior to the multidisciplinary staff conference and at any point during the child's education.

Each participating agency shall permit parents to inspect and review any education records relating to their children which are collected, maintained, or used by the agency under this part. The agency shall comply with a request without unnecessary delay and before any meeting regarding an individualized education program or hearing relating to the identification, evaluation, or placement of the child and in no case more than 45 days after the request has been made.[39]

What Happens if the School and Parents Do Not Agree on a Placement?
P.L. 94-142 provides for the resolution of differences between parents and agencies through an impartial due process hearing procedure as described in Subpart E of the Rules and Regulations. In the Comment following #121a.506, reference is made to the success of mediation as an intervening step prior to conducting a formal due process hearing. "In many cases, mediation[40] leads to resolution of differences between parents and agencies without the development of an adversarial relationship and with minimal emotional stress. However, mediation may not be used to deny or delay a parent's rights . . .[41]

The formal due process hearing may be initiated by either a parent or a public educational agency on any of the matters described in #121a.504 (a) (1) and (2). The hearing must be conducted by the state educational agency or the public agency directly responsible for the education of the child, as determined under state statute, state regulation, or a written policy of the state educational agency.[42]

For details of hearing rights, of the qualifications of an impartial hearing officer, the timelines and

convenience of hearing and reviews, as well as details of the Administrative Appeal and Civil Action, see Subsecton E of Rules and Regulations.

Who Can Become an "Impartial Hearing Officer"?

People with a wide variety of backgrounds may become impartial hearing officers. However, restrictions are specified.

(a) A hearing may not be conducted:
(1) by a person who is an employee of a public agency which is involved in the education or care of the child, or
(2) by any person having a personal or professional interest which would conflict with his or her objectivity in the hearing.

(b) A person who otherwise qualifies to conduct a hearing under paragraph (a) of this sec tion is not an employee of the agency soley because he or she is paid by the agency to serve as a hearing officer.

(c) Each public agency shall keep a list of the persons who serve as hearing officers. The list must include a statement of the qualifications of each of those persons.[43]

How Are Hearings Conducted?

Written evidence (such as test results, academic records, and evaluation reports) is introduced and witnesses are asked to share their knowledge and points of view. The hearing officer reviews the evidence and testimony and reaches a decision. This decision must be reached no more than 45 days after the school has received a request for a hearing.

(a) Any party to a hearing has the right to:
(1) be accompanied and advised by counsel and by individuals with special knowledge or training with respect to the problems of handicapped children;
(2) present evidence and confront, cross-examine, and compel the attendance of witnesses;
(3) prohibit the introduction of any evidence at the hearing that has not been disclosed to that party at least five days before the hearing:
(4) obtain a written or electronic verbatim record of the hearing;
(5) obtain written findings of fact and decisions . . .

(b) Parents involved in hearings must be given the right to:
(1) have the child who is the subject of the hearing present; and
(2) open the hearing to the public[44]

Appeals Process

If either party is dissatisfied with the decision of the impartial hearing officer, they may appeal. A hearing officer, appointed by the state educational agency, reviews the evidence and must allow both parties the opportunities for oral or written arguments, or both. His or her decision is final unless either party decides to bring civil action against the other.

What Happens to the Child During Due-Process Proceedings?

The child's status stays the same as it was before the disputed action took place. If the parents are disputing an initial placement in special education, then the child remains in regular education. The following pertains to the child's status during proceedings:

(a) During the pendency of any administrative or judicial proceedings regarding a complaint, unless the public agency and the parents of the child agree otherwise, the child involved in the complaint must remain in his or her present educational placement.
(b) If the complaint involves an application for initial admission to public school, the child, with the consent of the parents must be placed in the public school program until the completion of all the proceedings.[45]

What If There Are No Parents Who May Speak for the Child?

P.L. 94-142 has made provisions for surrogate parents to be appointed when no parent can be identified or located, or if the child is a ward of the state. The surrogate parent must have the knowledge and skills to represent the child and have no interest which conflicts with the best interests of the child. He or she represents the child in all facets of the provision of special education.[46]

Can School Personnel Be Sued if the Child Does Not Make the Progress Outlined in the IEP?

The IEP is a written agreement to provide services with specific goals and objectives. It is not a guarantee that the child will make a certain amount of progress. Specifically, P.L. 94-142 states:

> Each public agency must provide special education and related services to a handicapped child in accordance with an individualized education program. However, Part B of P.L. 94-142 does not require that an agency, teacher, or other person be held accountable if a child does not acheive the growth projected in the annual goals and objectives.[47]

It is reasonable to make goals and objectives realistic and achievable and to keep parents informed of the child's progress or lack or it. If it appears that goals will be significantly altered, parents should be informed and another meeting called to revise the IEP, if necessary.

Summary

We have reviewed some of the major provisions of P.L. 94-142. These and other provisions are discussed in detail in the following chapters. In addition, funding procedures, requirements for personnel development, timelines for implementation, and a host of other issues await your detailed investigation in the federal rules and regulations.

A rigid application of the law, without consideration of the uniqueness of the child, could lead to an inflexible educational program with a mechanical flavor lacking the empathy and creativity which is essential to learning. Because of his or her concern for and orientation toward understanding the whole child, the school social worker can make many contributions toward the humane implementation of the law.

With an increased parental role in special education, communication between school and home becomes significant in a legal sense. If school policies and programs are interpreted to parents clearly and if parents are accorded their proper rights in the planning for their child, the education of handicapped children will have taken a giant step forward.

CHAPTER III

Decision Making and Design for Delivery of Services: The Individualized Education Program

Robert Constable and Bill Tegeler

Many of the major changes in social work practice brought about by P.L. 94-142 are connected with procedures governing referral, evaluation and placement decisions and, in particular, the Individualized Education Program (IEP). The law, with its procedural safeguards, may not so much affect what we traditionally have done as school social workers as much as it changes the environment of decision making, recording, and accountability. The basic change is that our professional activity and decision making are no longer, if they ever were, something we do by ourselves. The law will enable us to become clearer about what we do, it will clarify how we are to work in cooperation with teachers and parents, how we are to contribute to the educational mission of the school, and how we contribute to the education of certain children. The needs of the educational system for social workers will become increasingly clear as social workers proceed to define what they have to offer. In this respect, the law is not merely a new set of procedures. Rather, it is a challenge to social workers to demonstrate precisely what we have to offer to children, to parents, to teachers, to administrators, and to the educational system. The law could confirm the need for certain of our functions and will open the way for a greater utilization of social workers' skills. If we cannot come to terms with this challenge, we may be taking the first step toward marginality and eventual extinction of social work in public education.

The IEP Focus for the Social Worker

The IEP is the central management tool used to insure the handicapped child's rights to a free, appropriate public education. It is a statement of goals, objectives, and necessary resources with due process protection. The parents are involved participants in the development of this resource statement. It provides procedural safeguards and assurances that the education will be appropriate to the child's needs and, insofar as it is possible, the placement of the child into learning situations with nonhandicapped children. Well defined goals and objectives must be expressed as behaviors expected of the child. Current behaviors establish the reference point from which goals and objectives are generated and establish a baseline against which progress can be measured. Goals and objectives are not, for example, a statement of what the social worker will do, but a statement of the expected consequences of the intervention.

The Individualized Education Program is the product of a team effort. There is no such thing as a social worker's or a teacher's or a school nurse's IEP for a child. To the extent that each member of the multidisciplinary team is involved in helping to produce an IEP for a given child, each has a particular contribution to the achievement of the goals on the IEP.

There are three major obstacles for social workers in meeting the challenge of the IEP. The first obstacle is ourselves. We are not accustomed to thinking in terms of behavioral objectives. Social workers think holistically. One might infer that behavioral objectives are derived from behaviorism. It is important, however, to seperate behavioral objectives from behaviorism as a theoretical system. Behavioral objectives are simply a more precise language for describing what we want the client to accomplish and what we will do to assist him/her. Specific behavioral objectives allow measurement. Such specified goals and objectives are compatible with any theoretical orientation. The use of behavioral objectives allows our meanings and intentions to become clearer to others and to ourselves.

Secondly, professionals have a tendency when defining goals and objectives to define them in terms of what they (the professionals) do, of what they know best, and feel most comfortable with. As regards the IEP, however, goals and objectives need to be defined as outcomes for the student and this can be a far more difficult process. Objectives cannot reflect merely the professional orientation of the service providers, whether they are teachers or social workers. Education of handicapped children is not purely and narrowly academic but also includes education for effective living. As discussed in the first chapter, several important parts of education are directly relevant to the social worker.

A third obstacle is that problems, as teachers see them and as referred to the social worker, do not always convert easily into goals and objectives described in behavioral terms in the IEP without going through a set of intermediate steps. If we are to define school social work related goals and objectives in an IEP, we need to have gone through a previous step of clarifying the problem and its relation to the educational process. There is a logical sequence to this clarification which precedes development of the Individualized Education Program, but is directly geared to its requirements.

The Contents of an Individualized Education Program

The IEP for each child must include:

(a) **a statement of the child's present level of educational performance.** The child's baseline levels in various areas of educational performance (e.g, academic performance, classroom behavior, social skills) are used in determining the appropriate goals and objectives for that child. The comparison of the present levels of performance with the levels at which the child should be functioning reveals the areas of deficit. It is the responsibility of the multidisciplinary team to provide input which establishes the child's present levels of performance. These baseline data are the result of collaboration among the various persons who deal with the child and his/her education. Identifying present levels of performance is necessary so that there is a basis for judgment in establishing goals as well as for later evaluation and adjustment of goals and program.

(b) **a statement of annual goals, including long-term and short-term instructional objectives.** Annual goals for a child should not be established from the disciplinary bias of one profession. In order to arrive at reasonably valid annual goals and short-term instructional objectives, the contribution of persons knowledgeable about the specific areas in which the child exhibits strengths and weaknesses is essential. The use of the word "instructional" should be taken in the broad sense of the law as relating to the process of instruction. Decisions regarding needed special education and related services are derived from the stated goals and objectives. An annual goal is a specific statement of the skills the child should be progressing toward within the framework of the school year. Annual goals serve as an index of student progress. Short-term objectives are the steps toward attainment of these goals.

(c) **a statement of the special education and related services to be provided to the child, and the extent to which the child will be able to participate in regular education programs.** The statement of needed special education and related services is derived directly from the annual goals and short-term objectives. If necessary resources are unavailable within the school, the school must contract with outside agencies, individuals, or other school districts to ensure their provision. Parents, as part of the multidisciplinary team, must be included in the decision making process which determines these resources. The law also requires a statement of the extent to which the child can participate in regular education, underlining the importance of the process of developing the Least Restrictive Environment for the handicapped child.

(d) **the projected dates for initiation of services and the anticipated duration of the services.** These time guidelines are established concurrently with the annual goals and short-term objectives, based upon an estimate of the time necessary for completion of the goals and objectives.

(e) **appropriate objective criteria and evaluation procedures and schedules for determining, on at least an annual basis, whether the short-term instructional objectives are being achieved.** Objective criteria are components of the child's behavior that may be observed and measured. Objective criteria may be used to compare the child's current performance with previous levels of performance (formative evaluation) or they may be compared with a classroom norm that is typical of children his age (summative evaluation). The results of these comparisons indicate whether or not short-term objectives are being achieved, or whether new and different objectives may be in order.

Stages of Problem Definition for the Social Worker

In order to arrive at a final formulation of behavioral objectives which reflect the social worker's contribution to the overall IEP, our thinking will typically go through a series of stages. The stages can be a type of checklist which you may find helpful.

1. The first stage of problem definition is that of the **presenting problem.** This is the problem as it is referred and reflects the needs of the student as viewed by the person(s) making the referral.

2. After we understand the nature of the presenting problem, we immediately begin gathering additional information to get a grasp of the problem as a whole.

3. After we have a more holistic understanding of the child's life situation, we can begin to understand the meaning that school experiences have for the child. The child's behavior within the educational context becomes comprehensible. This understanding can be focused on the problem(s) as experienced in the school.

4. We then define the school problem further into specific behaviors or evident needs of the child (i.e., for resources, for skill development).

5. Building upon the specific behaviors or unmet needs expressed in the baseline(s) established above, **annual goals and short-term instructional objectives are established**, together with a timetable for their achievement in concert with other members of the multidisciplinary team.

6. With goals and objectives established, it is important to identify any external **barriers** to service delivery which may have to be overcome.

7. The IEP is completed and includes a list of specific educational services required to attain the above goals and remove barriers, together with the persons responsible for such services and the extent to which the pupil will participate in the school program.

Using the above sequence, we may then break down the steps that must be followed to arrive at those goals and objectives in the IEP which involve the skills of the school social worker. The steps represent a way of clarifying our own goals and involvement in developing the IEP.

The Presenting Problem

In order to be eligible for P.L. 94-1452 funding, the "problem" must relate to the categories of handicaps written into the regulations (see Chapter I). The fact that the youngster fits into one of the categories, e.g., hard of hearing, does not automatically make him/her a candidate for social work intervention, however. The inability to deal with stress, potential breakdown of social functioning, or needed improvement of social functioning are general reasons for referral to a social worker. The additional stress of a handicap and the need for individualized environmental support systems are reasons that many handicapped children need social work help. The child with a particular handicap may have difficulty coping with the educational and social skill demands of the school. He may need help in acquiring such skills and in dealing with experiences which are new and frightening.

A Hypothetical Case Study

Let us follow a simple referral, IEP, and service sequence through each of the stages mentioned. The reader should keep in mind that this is a hypothetical case study and that the type and extent of the school social worker's involvement in a particular case will depend on the individual child's needs as determined by the multidisciplinary team. We may begin with the presenting problem. Jimmy is a multiply physically handicapped 12-year-old, who is borderline educably mentally handicapped. He was referred because of his teacher's concern that his excessive demands for attention were impeding his learning process in several regular education classes, particularly in gym.

The Problem as a Whole

The school social worker's conference with teacher and parents resulted in a picture of a boy whose performance in school has been quite uneven and whose ability to function adequately in school has been hampered by parental overprotectiveness and disagreement on the degree of independence he should be allowed. He is currently enrolled in both special and regular education classes with poor adjustment to some of these classes, overwhelming needs for attention from adults, and withdrawal from relations with other children. On the basis of this and other information gathered, the social worker makes a diagnostic statement which draws some connections between Jimmy's role in the family, the parents' feelings and the way Jimmy has played out some of these family role interactions in school behaviors, particularly with parent-like school figures and teachers. The social work diagnostic statement also reviews alternative class placements together with some predictions of how well they will work. The statement also includes alternative plans for working with the family, with Jimmy, and with his teachers. The results of the social worker's diagnosis, combined with information contributed by other team members, will be used by the team to formulate the statement of present levels of educational functioning in the IEP.

The Problem as it is Experienced in the Context of Education

The next step is to define the problem as it is being experienced in the classroom and in relation to the goals of education. At the risk of over-simplifyng, we may provide several social parameters of the educational problem. One parameter is that of engagement or withdrawal from educational tasks appropriate to the youngster's capabilities. The youngster may either engage in the learning process with distracting, attention getting, inappropriately aggressive behavior or may withdraw from the process, attempting to compensate in other ways for the withdrawal. A second parameter is that of engagement or withdrawal from relationships with other children. Pupils need to learn social skills appropriate to their own maturational level. The learning of these social skill influences the performance of educational tasks. There is also a relation between the learning environment and the child's social maturation.

To follow our example, the school wishes to place Jimmy in a particular gym class with nonhandicapped children. We can predict with some certainty that Jimmy will place high demands on the gym teacher and the other pupils, and that the parents, while accepting of the idea, might endanger the arrangement because of their own anxiety and worries about Jimmy. Failure in the gym class could generalize to several other classes where he has recently made some adjustment. There is particular concern with the gym class due to dressing, showers and inherent physical competition. Any one of these factors might place Jimmy's use of what the school could offer him at risk. What we know about the problem allows us to predict with some degree of accuracy the chances of goal achievement within different behavior settings in the overall ecology of the school. This understanding allows us to move to the next stage, definition of the problem in behavioral terms.

The Problem as Behavior

The purpose of this stage is to state the school social worker's formulation of the problem in behavioral terms and to relate it to the educational goals established earlier. Behavioral terms are statements of the client's present functioning, or what Jimmy is presently doing. These terms establish a baseline for goals and objectives and must be specific.

Behavioral objectives risk fragmentation and meaninglessness if they do not flow from the process of problem definition discussed above. The school social worker may find himself/herself in the position of choosing from a seemingly infinite range of behaviors for any child. Actually, a few well-chosen examples are much better, particularly if they may serve as indicators.

To go back to our example, Jimmy has difficulty dealing with a situation which seems competetive and which draws attention to his poor functioning. Under stress he has tended to retreat into social relations with adults from whom he demands high levels of attention. He is particularly uneasy with the dressing and showering aspects of gym. His parents' anxiety reveals another set of needs in the situation. Teachers also can tend to overreact to the situation, increasing the chances of failure. To enumerate specific aspects of the problem:

1. Jimmy withdraws from situations involving physical competition. Without intervention, the pattern is expected to continue or increase in gym class.

2. Jimmy tends not to interact with nonhandicapped peers.

3. Social interaction with handicapped peers is limited.

4. Jimmy has no close friends.

5. Jimmy makes excessive demands on adults, especially teachers, but doesn't function in the classroom up to his own capacities without constant support from the teacher.

6. Jimmy is particularly self-conscious concerning dressing and showering aspects of gym.

7. His parents have tended to protect Jimmy from situations which demand independence or involve any risking of self.

8. Teachers have tended either toward excessive protection or excessive expectations of independence with Jimmy.

Annual Goals, Short-Term Objectives, and Resources

Finally, we may define goals and objectives. Annual goals are specific statements of the skills the student should be progressing toward within the framework of the school year. Annual goals evolve out of the assessment of the child's needs and abilities and should be an index of student progress. Although there are different formats which may serve as examples for a particular child's IndividualizedEducation Program, most would probably contain:

1. the *direction* of change desired--to increase, decrease, to maintain;

2. *deficit* or *excess*--the general area that is identified as needing special attention;

3. *present level*--what the child now does in deficit or in excess;

4. *expected level*--where the child realistically could be or what he could gain, with proper resources;and,

5. *resources* needed--to accomplish the needed level of performance. Resources could be

specialists, materials, situations or methods required to bring about the desired change.[48]

Jimmy's case, there are two major annual goals. The components are listed above the goal statement.

Annual Goal 1:

direction/deficit */from* */to*

For Jimmy to increase/ positive social relations with nonhandicapped peers/from limited/to more

/resources

informal/through interaction experiences in a group with the social worker and regular social work contacts with the parents and teacher.

Annual Goal 2:

direction/

For Jimmy to maintain/his current academic adjustment with placement in a regular education

resources

classroom situation/using reinforcement in the classroom, regular social worker contacts with Jimmy, and close parental liaison. Note that the direction set in the second goal is maintenance of current functioning. Maintenance equates present and expected levels of functioning.

Short-Term Instructional Objectives

Short-term instructional objectives can be thought of as steps toward achievement of the annual goals. These steps are really milestones through which progress toward the annual goals can be assessed. For the social worker, these can be indicators or changes in behavior and do not have to reflect every single objective which might be defined for that goal. For Jimmy, our hypothetical case study, some short-term instructional objectives might be:

1. Jimmy's level of class participation and quality of assignment completion in his regular education classes will be maintained at his current level through January 15.

2. Jimmy will interact compatibly with nonhandicapped peers in an unstructured group task by March 15.

3. Jimmy will interact comfortably and spontaneously with nonhandicapped peers in an unstructured lunchroom situation by May 15.

4. Jimmy will form casual friendships with handicapped and nonhandicapped peers by June 15.

5. Jimmy's distractability and talking out in class will reduce by 50% by June 15.

6. Jimmy will be able to dress for gym without special arrangement by January 15.

Resources

There may be external barriers to Jimmy's accomplishing the above goals and objectives.[49] For example, teachers and parents may need help to avoid overprotecting Jimmy or some modifications in the gym program may be necessary. A list of the specific educational services required must be written into the IEP so that the goals and objectives can be implemented. The extent to which the pupil will participate in a regular school program must also be determined in the IEP. The list of services and persons responsible is essentially a resource statement. Parents have a right to request that educational services that are included in the IEP, but are not availablity in the school, be purchased by the school district for the child or otherwise be provided at no cost to the parents.[50] Examples of such services might include:

1. The social worker will see Jimmy once a week for a 45-minute period with a group of other handicapped children who are also dealing with a mainstreamed class. The appropriateness of whether Jimmy should continue in the group will be re-evaluated on or about January 15.

2. The social worker will monitor Jimmy's group progress and act as liaison between the multidisciplinary team and the family service agency helping Jimmy's family and inform Jimmy's parents of progress.

3. The teacher will monitor Jimmy's achievement of the above objectives reinforcing independent and peer-affiliate behavior.

Sample IEP forms appear in Appendix A. The multidisciplinary team which writes each IEP must be creative but at the same time must be in compliance with the law. Form A puts all of the data pertaining to each individual annual goal on one sheet. It may be rather crowded and difficult to review, but it is concise. Form B is quite specific, taking a number of pages, but using a checklist for rapid completion. The checklist does tend to remind the team of any missing pieces. Its length might be a problem in the IEP staffing with the parent. Forms C and D allow more flexibility and are shorter but lack the specificity of Form B.

The resemblance of the above steps to current practice of school social workers is no coincidence. School social work practice is already multifaceted. The mandates of P.L. 94-142 are, in fact, mandates for very much the type of service to handicapped youngsters the school social worker is most equipped to give and, in fact, has been giving. The IEP provides direction for service and is a vehicle for accountability. For this reason, it needs careful thought. Based on the Individualized Education Program, the chapters following draw out further implications for social work practice of P.L. 94-142. Rationalized procedures, a different quality of teamwork relationships and parental involvement, the implementation of the Least Restrictive Environment and coordination of community resources, all of these develop from the IEP. The following chapters explore the changes currently taking place in service delivery systems and school social work practice along each of these dimensions.

CHAPTER IV

Procedures for Referral, Evaluation, and Placement

Marguerite Tiefenthal

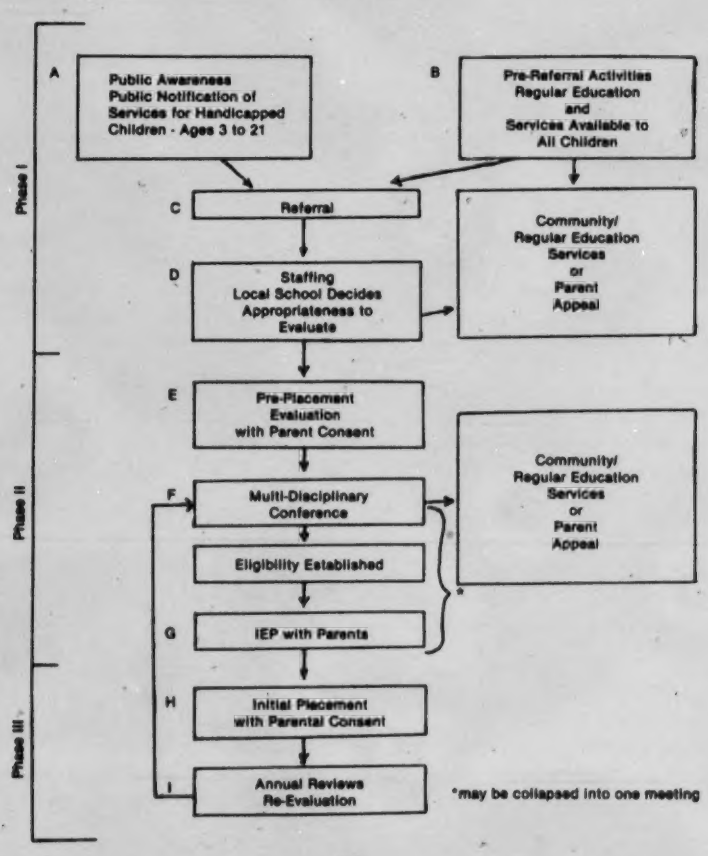
P.L. 94-142 is very specific in its procedures covering the referral, evaluation and placement of handicapped children. These procedures will naturally vary from state to state since each state's plan must be consistent with its state law.[51]

Despite the differences brought in by state laws, the basic procedures for working with handicapped children will probably be fairly consistent. Resources for students, however, will vary to a larger degree since some states have had a longer term investment in special education than others and have had more extensive programs and services with which to serve children. In some states, many of the procedural safeguards which P.L. 94-142 insures were being observed long before they were mandated by law. In other states, implementing the directives is inherently more stressful since there were more unmet needs and more resources which had to be built into the education program. Carefully structured procedures insure accountability within the referral, evaluation and placement processes where collaboration is required. These procedures assist in defining the role of specialists. The procedures can help in carrying out the main purpose of the law, assuring that the student's individual needs will be appropriately addressed and served. With this in mind, an outline of the procedures involved in the referral, evaluation and placement will be described, with particular emphasis on the potential contributions of the school social worker to the process.

To facilitate the discussion on procedures, the following Flow-Chart (Table 1) will be used. Procedures will be broken into three Phases with a total of nine steps. Phase I is the Public Awareness, Pre-Referral and Referral portion of the process; Phase II is the Evaluation and Multidisciplinary Conference including the establishment of eligibility and the formation of the IEP; Phase III is the implementation of the IEP, including placement of the Annual Review and Re-Evaluation. The procedures diagramed in Table 1 are an interpretation of the process outlined in the guidelines for P.L. 94-142 developed by one local elementary school district in Illinois. In this district, school social work services are available to all regular education students as well as to special education students.

Table 1

Procedural Flow Chart



Phase I

Step A: **Local Educational Agency's Responsibility Regarding Public Awareness and Public Notification**

Services for Handicapped Children from the ages of 3 to 21 must be publicized to the community served by the school district. This is frequently accomplished through public announcements in the local newspapers, flyers sent home with elementary school-aged students, contacts with nursery schools and pediatricians, and posters placed in various locations such as laundromats.

Social workers, through their contacts with many informal groups in the community as well as professional contacts, are frequently the first line of communication between children of special needs, their parents, and their school. Theirs is the opportunity and the responsibility to assist in publicizing services for the handicapped and to work cooperatively with other professionals and parents toward the creation of services for those students who are not served or who are underserved.

Pre-school screening programs which identify and evaluate pre-schoolers are available in many districts and special education cooperatives. As members of the screening team, school social workers:

1. confer individually with parents regarding their concerns about their pre-schoolers (i.e., maturational development, disturbing behaviors, entrance into formal schooling, effects of trauma and change, resources and referrals for assistance--both in-district and out-of- district);
2. arrange follow-up conferences, as needed, for consultation regarding the pre-schooler's needs;
3. confer with kindergarten teachers regarding a child's strengths and weaknesses.

Step B: **Pre-Referral Activities**

Regular education teachers usually are the first to notice if a student is having difficulty in school. This concern frequently leads them to consult other professionals in the school and to initiate changes in the child's program. The school social worker may be asked to assist by observing the child in the classroom or playground, by conferring with the child's parents, or by counseling the student either individually or in a group. These efforts may adapt the regular classroom environment sufficiently so that a special educational placement is not necessary. Pre-referral activities may be short-term, long-term or crisis intervention. They may be planned to allow time for an adjustment to a crisis in the home or school, to an illness or to a combination of disrupting factors. Frequently, working promptly with teachers when potential problems are spotted early prevents more complicated problems at a later time.

Step C: **Referral**

A written request for evaluation of the student's learning problem may come from a variety of sources, including parents, child advocates, and social workers, although in the majority of cases the regular education teacher and the local administrator request the evaluation. Parents are becoming much more knowledgeable about their rights and can be expected to become more active in requesting evaluations of their child.

The referral form constitutes a formal request for a case study evaluation and is considered a formal document in a child's record. It may request varying amounts of information about the child and the school problem. At minimum, it requests the date, the signature of the person making the referral, the principal's approval, the reason for the referral, previous intervention designed to assist the student, and what the person making the referral hopes will be accomplished. Frequently, a problem is defined in terms of the student's learning progress and/or behavior.

Step D: **Local School Decides Appropriateness for Case Study Evaluation**[52]

A formal meeting is not mandated, but this author feels that it is time well spent. The purpose of this meeting is to decide whether a case study evaluation is indicated at this time or not. Current material and data available concerning the child is shared and discussed. The staff may decide to adjust a program, try another program, service, or environment, or postpone evaluation while continuing with modified regular education services or services available in the community.

The parent is requested to be present at this pre-evaluation meeting. The teacher, principal, school social worker, psychologist, resource teacher, or any other staff involved with the child should be present. Whether the decision is made to evaluate the child or not to evaluate the child, the person making the referral is to be informed of the decision and the reasons for that decision.[53] If the parent concurs with the decision to evaluate, plans can be made to obtain written parental permission for the evaluation.[54] If there has been no previous contact with the parent(s), this contact may begin a meaningful and useful relationship. In many cases, the school social worker may need to spend a good deal of time with a parent in order to secure his approval for evaluating his child, since evaluation has all kinds of meaning for parents. Misunderstandings may need to be cleared up and parents may need assurances and access to information about evaluation and remediation. Some examples

of parent concern might be: where testing of their child will take place, who will be doing what for their child, the kind of information sought, what will be done with the information compiled, what the time lines are for completing the evaluation, what will happen to the record, what is their right to object to information in their child's record, who will be working with them on the social development history, and assurance that they will be consulted about a meeting time and place for the multidisciplinary conference. Parents also need to be informed that their written consent is required prior to any evaluation, re-evaluation, and initial placement. In the school social worker's contacts with the parents, most questions about procedures and processes can be easily answered. This benefits the school in helping the procedure run smoothly and avoiding breakdowns in communication which can lead to time consuming and expensive due process appeals.

If parents request an evaluation of their child and the school does not concur, the parents may appeal. Another reason for having the parents at this important meeting is to help them understand, first hand, the school's decision regarding evaluation. Minutes of the meeting, including the reasons for the decision regarding evaluation, are sent to the parents.

If this meeting occurs, and if written parental consent is obtained, assignments are made so that the multidisciplinary team can move ahead with the evaluation. If the parents are in attendance, the scheduling of the multidisciplinary conference at the mutually agreeable time and place is agreed upon. Parental consent in writing to evaluate **is** mandated in paragraphs 121a.500 (c) and 121a.504 (b) (1) of the Federal Rules and Regulations published in the August 23, 1977 **Federal Register**.

Phase II

Step E: **Evaluation**

The child must be assessed in all areas related to the suspected disability including, where appropriate, health, vision, hearing, social and emotional status, general intelligence, academic performance, communicative status, and motor abilities.[55] This data is gathered by the multidisciplinary team in their specialty areas and includes formal and informal information as discussed in Chapter II.

Probably the least understood contribution of the school social worker is the psycho-social developmental study. The psycho-social developmental study provides a context to the findings of other team members, either supporting and corraborating the accuracy of the data or adding another dimension. Frequently, such background material provides the understanding necessary to make a differential diagnosis of the student's learning problem and enables the team to sort out major factors of the problem and see aspects of interrelatedness. Sufficient time needs to be allowed to establish rapport with the parents, to meet with them in their home and/or at school, in order to gain an understanding of the family dynamics, attitudes, strengths, and weaknesses. This is most useful in planning a workable program for the student.

If the data presented indicates that the student **is** eligible for services to the handicapped, that is,is evaluated in accordance with paragraphs 121a.530 - 121a.534 of the **Federal Register** of August 23, 1977, and if the child meets the terms of the definition of handicapped children found in paragraph 121a.5 of the same **Federal Register**, the child's needs will determine the services recommended. (Additional criteria for determining the existence of a specific learning disability may be found in the **Federal Register** dated December 27, 1977, paragraphs 121a.541.)

If a child is found to have a specific learning disability, the team is required to prepare a written report of the results of the evaluation. The report must include a statement that the child does have a specific learning disability, the basis for making the determination, the relevant behavior noted during the observation of the child, the relationship of that behavior to the child's academic functioning, educationally relevant medical findings, whether there is a severe discrepancy between achievement and ability, and the determination of the team concerning the effects of environmental, cultural or economic disadvantage. With this written report, each team member must certify in writing that the report reflects his or her conclusions.[56]

The evaluation of the student is accomplished, then, by the team members gathering their information, data, and their professional impressions which will be shared at the multidisciplinary conference, preferably with the parents in attendance.

Step F: **Multidisciplinary Conference**

Parents are to be included, if at all possible. The law mandated that parents be included if this meeting includes the development of the child's IEP. A separate meeting may be held to develop the IEP and parents should be in attendance. The team coordinator or leader must be able to document the school's efforts to contact the parents and arrange a mutually agreeable time.

If the data presented indicates that the student is not in need of special education services, the

team may make recommendations to assist the student in the regular education classroom. The team may provide consultation for the teacher, suggest services, special tutoring, or resources available in the community. If the parents wish to appeal the decision regarding eligibility, instructions regarding how to appeal must be given to them.

Step G: **The Individualized Education Program**

Once the child has been properly evaluated and has been found to be eligible for special education services, the needs of the individual child as viewed by the multidisciplinary team become the basis for the Individualized Education Program discussed in the preceding chapter. The IEP may be developed during the multidisciplinary team meeting or the IEP may be developed during a special meeting, but if the IEP meeting is separate from the multidisciplinary team meeting, it must be held within 30 calendar days[57] of a determination that a child needs special education as discussed in Chapter II.

As the specific objectives are reached, the IEP may be revised and updated. Also, as the child matures or is faced with new school, social, or home situations, IEPs will need to be adjusted. Frequently, more than one staff member is involved in working with a student, particularly those students who participate in both regular education programs and special education programs. Meetings may need to be planned with parents attending when significant changes are planned. When a child's behavior is interfering with his learning progress, and the school social worker is involved, additional meetings may need to be held to facilitate collaboration of all involved and to work out specific new goals and objectives. In summary, then, all staff members working with an individual child will need to plan up-dating sessions of the child's IEP as progress or lack of progress dictates. If parents are not present, they should, of course, be apprised of changes so that they can be supportive in every way possible. The initial thrust in serving handicapped children is upon identification, assessment and planning, but these efforts will be wasted unless they result in enhancing the child's total learning environment.

Phase III

Step H: **Placement**

Placement is determined by an individual child's needs as written in his IEP. Placement of a handicapped child must be in the Least Restrictive Environment as is discussed in Chapter VII of the publication. Also, placement may include any additional service ranging from consultation available to the regular classroom to self-contained placement and residential educational facilities.[58] If the student is in need of placement outside of the district, exploration of alternative educational placements is in order. Assignment of this task by the multidisciplinary team to the social worker and the parents would be appropriate.

Step I: **Annual Reviews and Re-Evaluations**

Yearly reviews of the handicapped child's IEP are mandated.[59] Annual reviews usually are planned for the end of the school year, although the reviews can be planned for any time during the school year. Parents and the multidisciplinary team are again to cooperatively revise the IEP and plan for its implementation. At such time, the student's needs could dictate a less restrictive program, such as phasing the student back into a full-time regular education program. If disagreements cannot be resolved, the district or parent may request a due process hearing.[60] Re-evaluations are mandated for each handicapped child every three years and must be planned for if the student continues in special education programs for that length of time.[61]

Two additional flow charts are included in Appendix B. These are taken from the **Learning Disabilities Manual, Recommended Procedures and Practices**, and show a diagram for Evaluation of the Student (Table 2) and the Identification of High Risk Students (Table 3). As suggested here, it may be expedient to refer a child for evaluation to a special education cooperative or other facility after or without a review at the local building level.

Procedures, as mentioned before, will vary from district to district, from place to place, but certain standards must be maintained. In Illinois, items selected to be used as standards for implementing P.L. 94-142 may be found in the publication, **Images**, Manual for Assuring Guaranteed Educational Services, State Board of Education, Springfield, Illinois, November, 1978, pages 5 through 15.

CHAPTER V

Multidisciplinary Teams

Marguerite Teifenthal

The Individualized Education Program, perhaps the key to P.L. 94-142, demands teamwork since services to the handicapped student are to be developed by a multidisciplinary team acting as a unit. Team members, including the child's parents, must focus their skills on coming to a joint decision as to the services to be provided to the individual child.

Teamwork in various disciplinary areas is directed toward assessing the child's educational needs, developing the best educational program to meet those needs, implementation of that program, monitoring the child's progress and making necessary program changes as needed. Team members involved with a particular child will vary according to the specific handicapping condition being addressed. Team members may be teachers, administrators, special educators, psychologists, nurses, social workers, parents, and other apporpriate agency personnel. This teamwork, or joining together to address the needs of a particular student, brings the combined skills of the team members to bear on a particular situation. It is this combined expertise (with shared goals and responsibilities) which can stimulate output and make a task easier. The axiom that "two heads are better than one" reflects, at a common sense level, the notion that the chances of arriving at a good decision are increased by the additional professional perspectives involved.

In some schools there is a core group of professionals who operate as a team for a particular school building and who join with teachers and parents in collaborative efforts to deal with a student's educational progress. Team members can work effectively when they develop a sense of respect, trust, and mutual interdependence. No mandate, federal or state, will produce good multidisciplinary teamwork. It is the individuals involved and their ability to work together which will make the difference. Good teamwork means recognizing each other's competencies and skills, respecting each other's "territorial turf" and resolving the problems that can result from working closely together.

As a member of a team, it would be well to keep the following questions in mind: Who is being left out? Is someone with an important opinion not being allowed or encouraged to speak? Is someone tuning out of the group? Why? Is the topic of discussion (or disagreement) one that is related to the facts of the case? Are there hidden agendas which must be dealt with? Is each team member's role or territory clearly understood, or are people unsure of their place in the group? Are members being negative in their criticism of others' ideas? Do people feel safe at the meeting? Being sensitive to these problems is one first step toward effective teamwork.

Teamwork in Decision-Making

One of the major problems of working together is development of a group consensus. Two factors must be considered in any group decision. First, the decision must be based on the best available data and a critical assessment of all alternatives and their chances of occurrence. Secondly, the decision must be tenable, one that people will accept and commit themselves to.

One of the real advantages of the well-functioning team is its ability to identify potential problem areas and critically evaluate alternative solutions. This advantage may be completely vitiated by a tense, competitive team atmosphere which discourages people from being frank and open with each other and which creates an overly defensive attitude among team members. Care must be exercised and sufficient time allowed to make the best decisions. Unilateral decisions made by a single person with power, decisions made by default, and decisions made by a small coalition can easily prevent a team from achieving its decision-making potential. Decisions regarding plans for the education of handicapped children should be made by consensus after issues have been freely raised, debated, and modified when the team members, including the parents and/or the child, share a common feeling that the plan is right for the child. A true consensus is likely to be reached only after all team members have provided input. As noted before, this may take considerable time. There are no short cuts in good decision-making, but we cannot settle for expediency when we are dealing with the lives of children.

Teamwork in Evaluation and Placement Procedures

Before conducting a formal evaluation, a child's problem in learning or adjustment must be noticed by professionals within the school. Some children with serious problems may go unidentified for months or years. With professionals working together in a school system, however, an early identification system can be established to target children who need extra help. This group may also informally monitor the progress of a child and assist in the child's adjustment during transitional phases.

In situations requiring placement decisions, P.L. 94-142 directs each public agency to:
draw upon information from a variety of sources, including aptitude and achievement tests, teacher recommendations, physical condition, social or cultural background and adaptive behavior.[62]

Furthermore, the placement decision is to be made by:
a group of persons, including persons knowledgeable about the child, the meaning of the evaluation data, and the placement options.[63]

Thus, the evaluation and placement procedures require teamwork. The evaluation is not made by a single individual, but by a group of professionals. Careful interpretation of P.L. 94-142 and your state regulations for special education is required. Multidisciplinary evaluation is mandated, but the actual physical formation of a specific team with specific members is not.

Team Coordinator

The law, which is very specific about using the multidisciplinary team in evaluating the handicapped child, is silent as to the qualifications of the team leader, the team coordinator or the team manager. Any professional staff member may be appointed the team coordinator or different team leaders may be selected for various team meetings, or a particular staff member may coordinate all meetings about a particular child.

It is critical, however, that whoever plays the coordinating role be sensitive to all aspects of the child's problem, as well as the divergent points of view which may be represented by teachers, parents, and others. The coordinator or team leader must possess the abilities to facilitate communication, encourage cooperation, and assist the group in working effectively toward the common goal of helping the child. Interpreting evaluation data from various team members who represent different backgrounds and diverse points of view can be challenging, particularly in a group setting with parents present. Not all school social workers would meet these requirements fully, but it is no accident that school social workers have had explicit professional preparation in working with the child in relation to his environments and in facilitating team functioning. School social workers should recognize the usefulness of their skills and training for the team coordinator role. These skills are valuable in reflecting diverse points of view and in developing a consensus of opinion. The social worker may often be in a position to bridge the gap between the home and school, particularly if there are conflicting points of view. In many cases, it is the social worker who understands the feelings and expectations of the parents since it is that worker who may have counseled the parent and/or child as well as consulted with the child's teacher. Effective coordination of teams involving school personnel, parents, community resources, and others is challenging and calls for the best qualified person to fulfill that role.

Teamwork in the Individualized Education Program and in Delivery of Services

If it is determined that a child is handicapped and needs special education services, P.L. 94-142 requires that an Individualized Education Program be developed for that child in accordance with section 121a.340-349 of Subpart C of the law. A team is responsible for producing a child's IEP. Members of the IEP team must include:

(a) a representative of the public agency who is qualified to provide or supervise the provision of special education;
(b) the child's teacher;
(c) one or both of the child's parents;
(d) the child, where appropriate;
(e) other individuals at the discretion of the parent or agency;
(f) evaluation personnel (if a child is being evaluated for the first time).[64]

The specific make-up of the team can be expected to vary from child to child, but must always include the child's teacher. Additional persons who may be involved in planning for a handicapped child's needs are those teaching art, music, industrial arts, consumer education, homemaking education, and vocational education. Each specialist's assignment and task responsibility varies according to the short-term objectives of the IEP but those responsibilities must remain coordinated with those of the other professionals.

Teamwork helps children as the goals and objectives of the IEP are fulfilled. Teachers and social workers are to confer with parents regularly to review a student's progress and strengthen the mutual support system. When a student is ready to be returned to a regular education classroom, it is usually the same multidisciplinary team which has defined the child's educational needs and decided the strategies for helping the child that later decides on the changes in the strategies after the child's need for special education has been met and the child no longer needs a special program. Again, the multidisciplinary team plans for the necessary transition back to the regular education program. All team members share responsibility for a smooth transition into the new placement. The following example illustrates this point:

Joseph was returning to his home district after two years of intensive assistance in a language development class. The transfer decision was reached durng the summer because a new program was developed at the home school. Therefore, the school social worker arranged a conference with his special education teacher and the home building resource teacher to facilitate a smooth transfer and continuation of services. In addition, a staffing for the home school personnel was planned after the reopening of school. At this meeting, the home school personnel were briefed on Joseph's academic problems and the plans developed for his reentry into a regular education classroom.

During annual review conferences, team members assess the student's progress, re-evaluate his educational situation and make future plans, detailing the responsibilities of specific team members. Following through on a child's program, making the best decisions regarding the child's continually changing educational needs is the ultimate goal of team cooperation.

Summary

Teamwork is required in decisions regarding: identifying the needs of the handicapped child, development of the best educational program to meet those needs, coordinating the resources needed to carry out implementation of the program, and addressing necessary changes in the program as the child's needs change. Parents, and sometimes the child, together with other professionals, join together in planning and implementing the best educational environment and the best services for the child. Teaming--the working together of professionals, parents and others, can make the difference.

CHAPTER VI

Working Directly With Parents

Joyce Scholle and Bill Tegeler

Parents are the first educators of their children. Long before the child is exposed to any formal educational setting, he has formed patterns of living and patterns of relating to adults which will carry through his many years of exposure to formal education. The socialization the child receives at home continues to be a primary influence. Research on the effectiveness of schooling has established that, regardless of expense, type of program, or professional input, the school with all its resources cannot compete with what the child receives at home.[65] The school should not compete with the home: it is in the alliance of home and school and the positive involvement and sharing of school with parents that success is possible for the handicapped child.

Unfortunately, the history of parental relations with the school has been replete with barriers between home and school. Schools have not been eager to let parents into the process of education and parents have often felt threatened, defensive, and competitive at the prospect of sharing responsibility for their children with the "experts". This situation has been aggravated by a general feeling throughout our culture that, if the child is having problems, it must be the parents' fault. Teachers have not discouraged this belief and even youngsters themselves have often assumed it. On occasion, schools have acted without parental consent and at times have given inadequate attention to handicapped children and their parents. Until recently, instruction for children needing special education was relatively limited. For years, regular education teachers handled the education of most children regardless of the children's handicapping conditions.

P.L. 94-142 has made it clear that any decision regarding an educational plan for the handicapped child must result from a team evaluation and decision. One or both parents are to be members of that IEP team and are assured of protection of their rights as well as those of their children at every step of the process. This is not only the message of the law but it is guaranteed as the purpose of the law.

Social workers are uniquely situated, through their contacts with both the parents and the school, to assure that the intent of the law is carried out. Indeed, a major part of the social worker's role is to understand the expectations and attitudes of the parents as these expectations relate to the child's educational needs. In addition, the school social worker is in touch with the school and its various resources, as well as the community's resources, and can help each to move constructively toward a plan to help the child function successfully in an academic atmosphere. School social workers can act as a liaison between parents and school personnel by interpreting the needs of each to the other, helping to resolve any conflicts due to lack of understanding, and assisting each in the definition of and the implementation of a goal.

The term "parent" means a parent, a guardian, a person acting as a parent of a child, or a surrogate parent who has been appointed in accordance with the law. The term does not include the state if the child is a ward of the state.[66] In order for parents to be meaningfully involved in the education of their handicapped child, communication and decisions around that child must be in a language which they understand, i.e., their native language. It is clearly the intent of the law that if, and when, contact is made with the parent and/or the child, that the means of communication be adjusted to them since they are the ones whom the law is intended to benefit.

Parents can expect the school to take special measures to ensure that parents are present at the staffing. These special measures include providing parents with adequate notification of meetings and proposed program changes and making all reasonable attempts to schedule meetings at a time convenient to parents as well as staff. If parents are still unable to attend, the school needs to take other measures such as individual and conference telephone calls. For parents who still do not attend, the school needs to justify its efforts through records of phone calls, correspondence and visits to the home or place of employment.[67]

Parental reluctance to respond can make it difficult for the school to provide an appropriate education. Social workers can provide an important service to all concerned by explaining to the parents the need for them to be actively involved in the multidisciplinary meeting at which a decision is made concerning their child's eligibility for special education and related services.

Parents also participate in the development of the IEP and the annual re-evaluation of the child's program and progress. By participating in the formulation of the IEP, parents can understand the educational focus, the statements of goals, objectives and specific responsibility for each objective. It should be noted that parents may object to their child's IEP and, if a mutually agreeable plan cannot be devised, may request a due process hearing.

Parental involvement does not stop once a child is placed in special education or given special services. There is ongoing communication between the school personnel and the parents to keep them informed and involved and to apprise the school of any situation at home that may have a significant bearing on academic and behavioral progress. Social workers play a vital role in this communication, especially when there are emotional hurdles which could impede full understanding.

P.L. 94-142 sets the stage in some school districts for a completely new approach to the education of handicapped children. It expects a level of participation and provides power for parents which could change traditional attitudes toward education and the ways it has been delivered. It outlines the mechanics for delivery and monitoring and also provides formulas for financial remuneration to public agencies who comply with its mandates. The level of response of those involved will determine whether the letter and the intent of this unique law have been met.

The Social Worker and Parents - Some Practice Techniques

A social worker's position allows a holistic view of the situation. He/she is the logical liaison between the school and the parents and is the one best equipped to serve as the major contact person with both the school and the parents to assure that each step of the due process is followed. These steps would include obtaining permission for evaluation after helping parents to recognize mutual concerns, helping the parents participate in the evaluation and the eventual diagnosis, keeping them informed of subsequent steps and of their right to contribute to the decisions. The school social worker may also be responsible for advising them of their rights to obtain private evaluations, to use private counsel, to examine records and challenge them, and, if appropriate, to request a due process hearing. If necessary, the school social worker will participate in each subsequent evaluation. Contacts with parents, creating a meaningful link between the school and the home to facilitate parental involvement in the school life of their child have been well established in the school social worker's role. The requirements of P.L. 94-142 can build on this tradition.

Social workers have historically gathered relevant social and developmental information and have succeeded in resolving many questions raised by the diagnostic material. The emotional impact of a physical illness, diagnosis, or hospitalization may have had a more profound effect on the parents and/or child than the actual illness itself. A social worker's awareness and responsiveness to the many levels of communication enriches the ongoing diagnostic process and develops a supportive relationship to help the parents continue to engage in what could be a difficult experience. Also, if the social worker has interviewed the child, he/she can bring an understanding of the child's strengths and attitudes to the evaluation.

The social worker can contribute valuable information to a differential diagnosis and can continue to add to the understanding of the child's handicapping condition and how the child can be helped. The hopes, fears, and expectations of the parents can be understood and the basis for a trusting relationship, continuing through evaluation and placement, can be secured. Not only is the parent thus apprised of the law but is also helped to become active in the pursuit of the child's appropriate education. The social worker can continue to provide counseling to the child and/or the parent beyond the acceptance of the problem, into the areas of the home, the school, and the community that affect the child's adjustment. For example, the school social worker may work with a parent during the potentially stressful period when the evaluation is taking place and parent and child are in a position of waiting for the results and for an appropriate placement. At other times, the school social worker may provide counseling to the parents as well as to the school when the child may be returning from an institutional placement to a public school, attempting to make an adjustment to the parents, siblings, community and the school facility. As an "in-between person", the social worker is in contact with the home and the school, with community resources and with family resources; indeed, the social worker may often mediate when there is a disagreement between any of these sectors.

The "in-between" function of the school social worker is illustrated in the following vignettes of school social work practice with parents:

> Mr. & Mrs. J. find it difficult to acknowledge a problem with their son, Billy, because of their own deep identification with their child and feelings about their own school experiences. In a joint contact with both parents, the school social worker was able to help the parents share their feelings about Billy and the school, together with their underlying positive and genuine concern about Billy's future. She was able to help the parents find a more positive relationship with other members of the team and eventually separate their perceptions about Billy from their feelings about the school. The parents eventually were

able to work more positively with the school in relation to Billy's needs.

The parents of a severely neurologically impaired preschooler were distressed by conflicting assessments of their daughter's intellectual potential. Hoping for the best, while fearing the worst, their distress about their daughter's physical problems were heightened by the school's need to "help" the parents face the prognosis that the child would probably not succeed in a regular education program. The parents experienced further anxiety when professional assessments varied and the conflict brought internal dissention within the team. Professionals representing the child's school district and those representing the special education co-op were of different opinions regarding the degree of restrictiveness in the child's educational placement. Work had to be done with the parents in exploring educational alternatives and in helping them find the facility where their child could experience the most appropriate educational environment. Mediation was instituted with the regular education teacher and administrator to maintain the current placement of the child who could easily have been denied the opportunity for a least restrictive placement.

Summary

Working with parents can be both exciting and challenging. Most parents want information about their child's educational progress but may not be able to understand professional jargon. Even when they understand the problem, they may not know how to translate the understanding into relevant action. Utilizing the help which parents can give their children requires specific practical suggestions plus discernment of their expectations of the school and their attitudes toward the learning process. The attitudes of parents as well as their previous experiences and memories of their own schooling are all factors which may require tact and empathetic handling over a period of time. Obviously, parent involvement is one of the most important aspects in providing the best possible services for the child.

What social workers have been doing for years in working with parents and families, is now mandated by P.L. 94-142. The open sharing between school and parents, as facilitated by the school social worker, can provide the most hope that some parents have ever experienced. If the intent of the law is met, parents will no longer feel helpless, uninformed, and left out. They will be prepared to answer their children's questions and be supportive of special education services. They will be given assistance in how to help their child. Parents' longstanding need for assistance with the education of their handicapped children can now be met by the protections in the provisions of the Education for All Handicapped Children's Act.

CHAPTER VII

Parents' Expectations of Social Workers

Clyde Gehrig, D.S.W.

As a parent and as President of the Michigan Congress of Parents, Teachers, and Students, I would like to contribute an informed consumer's viewpoint on P.L. 94-142. What are parent groups responding to? What are parents demanding? Why the need for due process procedures? Why the push for school accountability? These are some of the issues I would like to address.

First, parent groups have vested interests on behalf of their children. As the due process and procedural rights come into focus with the full implementation of P.L. 94-142, these groups will make more demands of the school and will come to the school setting with specific expectations and requests for service. If this law is to become something more than a policy on paper, the demands and expectations on the part of parent groups must be accepted as a vital part of the process.

Barbara Bode, in an article entitled "Citizen Action for Children," observes parent involvement in this century as the development of an active advocacy posture on behalf of children by organized parent groups. In her opinion, this mood "was recognized by the government and the government first responded with Title I parent advisory committees and use of parent and community aides in Head Start Programs,"[68] but she adds:

> Today there are local groups and organizations for children throughout the country monitoring programs, evaluating programs, assessing needs, initiating new programs and facilities, and engaging in legislative lobbying. National organizations have been established to provide services, organizing help, information, technical assistance, and even legal aid. At times, the groups work in tandem, the state and national group fulfilling an advocacy role and the local group concentrating on services. In other cases, state or national organizations act as clearinghouses and simply replicate the work of local groups on a broader scale ... All began, however, with one or two people who saw a need and were concerned enough to try to meet it. Such local action is the key to effective advocacy and services for children.[69]

Bode continues her discussion of citizen action by presenting several case studies of parent group advocacy. In most cases, she says there are key elements in common which she identifies as advocacy and intervention.[70]

Harold W. Perry, in an article "Up Front with the President," adds to this discussion by focusing on parent involvement as it relates to P.L. 94-142. He states that:

> Unless we can get parents to join with us now more than they ever have before, we stand a good chance of being forced to take three giant steps backward. Documented facts, figures, and research are all well and good, but too many times they stand naked and alone unless coupled with the vital element of human emotion. Time and time again, history has shown that attitude can be more important than fact.[71]

It seems that what many parent groups are really heralding is the concept of maximum feasible participation, particularly where it involves the education of their children and their right to participate in that process. P.L. 94-142 sets forth some legal criteria which, in fact, represent a transfer of power and the social worker may become a facilitator in that transfer. Miller suggests that it is necessary not only to make a transfer of power but also to make a transformation of power:

> I would also urge that professionals seek ways to making the transfer of power to those who have been deprived of it also a road to the transformation of power. It is not just getting a new set of leaders with different complexions from the old but of developing new relations between leaders and the led, between the organs of government and the citizens. The issues of today of alienation and anger are not only about who is in power but about the nature of power as well. New claims for participation are being raised.[72]

Alan Abeson and Jeffrey Zettel write about this transfer of power as "The End of the Quiet Revolution." Discussing the implications for parents and professionals as set forth in P.L. 94-142, they say "in large measure, the burden for overseeing the effective implementation of this law rests at least in part with special educators, many of whom are the veterans of the battles just concluded." Among those involved in the implementation along with administration, teachers, psychologists, and parents, are the school social workers. Abeson and Zettel note that:

> One effect of the law will be to bring about a closer alignment of all educators--a goal that is desirable so all children can receive an appropriate education ... Clearly, the presence of policy that is modern, written, and familiar to the entire educational community is in the best interests of all those employed or served by it.[73]

Thus, in fact, this law will refocus educational policy in many communities. In some, it will transfer from the school to the parents and in other instances parents will demand rights guaranteed by the law. Some of these demands will be made by individual parents but many will be made by organized groups of parents demanding what they feel the law says is theirs. The stage may be set for confrontation and conflict. Hopefully, the school social worker is in a position to help interpret the law and explain where the process stands in the community.

Currently, parent groups in Michigan are discussing ways to disseminate information concerning the intent and implications of P.L. 94-142. Regional and statewide meetings, newsletters, brochures and special leadership meetings are all being utilized. These groups will be actively involved in the advocacy aspect, highlighting the need for parents to be assured that the educational plans are documented in writing by the school as this is a way to measure accountability under the law.

If the school social worker is able to promote and reinforce the attitudes of collaboration and cooperation in the parent groups and the school administration, it is more likely that a positive experience will occur. If not, the school will become more vulnerable to attack and ultimately the greatest attack will be on school funds.

Parent groups may have available resources, strength of numbers, and potential influence, particularly if there is a state and national affiliation. It is going to require the school social worker's willingness to risk his/her credibility to participate in the programs of these groups. If the school social worker chooses not to take the initiative, the parent groups will seek expertise elsewhere. Rather than a planned change, the school will be faced with management by crisis, and in this setting, everyone is the loser.

An obvious solution, and one which many school systems ignore, is that of devoting more time and manpower to bringing home and school back together--building an attitude of shared concerns and a climate of involvement.

What Do Parents Expect of a Social Worker?

Parents are in a vulnerable position in relation to the school. Despite the fact that these are their children, they are the "outsiders" in relation to the school. They lack technical information about the schools; they are often intimidated by the degrees, expertise, and language of the professionals. Their minimal information base forces them to make their way through the decision-making process with much resentment and little confidence that they may truly participate. They need someone in the school as a mediator and as an advocate, someone from the inside they can relate to over a continuous period of time, someone they can confide in, someone with empathy and someone interested in the day-to-day problems with which they are confronted.

Does the accountability in a mediator or in an advocate role place the social worker in a delicate position? There is no question that it does; but, on the other hand, the dual accountability, the challenge, and the opportunity implicit in this description of practice has never been foreign to the social worker. Since it is preferrable that the school system deal with conflicts in a constructive manner conductive to resolution, rather than in a destructive manner which could be damaging to all parties, it is extremely important and desirable, both for the school and the parents that the ombudsman role be carried out.

Often school social workers are viewed as fulfilling one or a combination of these roles: advocate, backbone builder, direct leader, teacher, lawyer, and only occasionally that of social enabler.[74] This role has been described as "the professional obligation of the worker to fight to the finish for the client's rights and needs and of embracing the vital principle of involving the client in the action, of helping the client to help himself in the area of social action."[75]

As president of the Michigan PTA, I see my job being made easier by perhaps one of the most significant pieces of legislation of the decade, P.L. 94-142. As a former school social worker, I have worked "both sides of the street" and have some firm impressions of how school social workers can work with parent groups. I see the school social worker as being a link between home and school, as

having a responsibility to work with parents. The social worker typically has the skills necessary to speak with community representatives and to communicate between systems. Often he or she knows the system well, knows where appropriate pressure may be applied and knows how to match resources with needs. In addition, the school social worker can make a substantial contribution within the school to the implementation of a mainstreamed environment for handicapped children.

Let us look first at the social worker's opportunity to work with parents. In some states, this is a legally defined responsibility of the school social worker. Even where it is not so defined, there certainly is the legitimate opportunity to work with parents. Frequently, the school social worker is already aware of the child with special needs and will have had the opportunity to establish a working relationship with the family. The child in school is only one aspect of the personal responsibility for the school social worker; sometimes he/she is the only source of continuity for the child and his family. Continuity is especially important to success for the special child but is important for other children as well. While classmates, the room environment, and the teachers change, and expectations may vary, the worker can be a person who is a continuous or stabilizing element for the child and his family.

Further, the school social worker can be the link between home and school from an administrator's point of view. Federal and state guidelines for special programs support the concept that parental involvement in any program makes the school setting more productive from an educator's viewpoint. Especially now that parents are more knowledgeable of due process and their rights in the education of their children, it is helpful to have this stabilizing element to bring together the concerns of the home, the responsibility of the school, and at the same time focus on the needs of the child. The school social worker is in a position to be this link, the stabilizer, the continuity factor. As a recent publication on parents' rights notes:

> Slowly a new view began to gain support that is making a dramatic change possible. Some of this change was brought about when parents and parent organizations went to court and demanded due process and equal protection for their children. Courts held that if a state provides public education for all its children, it must do so without discrimination against the handicapped. They must be treated equitably and with respect for their procedural rights.[76]

I view the school social worker as having a dynamic part in the successful implementation of this "new view," which is not necessarily new. Rather, it is basic to the social work concept referred to at the beginning, that of maximum feasible participation and client self-determination. This view, however, now has legal support for its implementation.

It is the school social worker who has the knowledge of how the system works, knows when and where to apply appropriate pressure to effect necessary change. As implementation takes place, the school social worker, because of his vantage point and his knowledge of the resources available, can help focus attention on the unmet needs of students. As one writer observed:

> Until quite recently, most states with compulsory education laws also provided legal ways to exclude children from school. Various labels were attached to children who were lumped together under the heading 'uneducable'. Throughout the country, hundreds of thousands of children were excluded from public schools on the basis of such laws. While in the past, many parents and educators expected very little of these children and accepted the belief that most of them were uneducable or untrainable, a very different view is generally held today. According to this newer idea, all human beings can benefit from appropriate education or training.[77]

The school social worker can be a key person when parent groups begin organizing to effect change in the educational offerings available or not available in their community. As these groups begin the organizational process, it is the school social worker more than any other professional person who possesses the skill in community organization and communication to work with parent groups.

Beyond liaison and community organization functions there is the social work role of advocacy. Advocacy has been defined in two ways: one who pleads the cause of another, as in the legal advocate, and one who argues for, defends, maintains or recommends a cause or proposal as in the political advocate.[78] As we are dealing more with law, rules and regulations, at times we are functioning within the legal definition of advocacy. In addition, because much of what the school social worker does requires social action, the worker must be skilled in the political action arena as well.

Both advocacy definitions--pleading the cause of another and defending a cause--have their place in social work today. A more complex question is the amount of leadership which is appropriate for the school social worker to exercise. "Advocate determination rather than client determination tends to establish a client dependency upon the practitioner which is counter to the traditions and goals of social work."[79] If the worker actively seeks to fulfill his professional obligation regarding client self-determination, that is, by seeking out the client's choice and direction as a guide for a course of action, the problem of advocate determination is reduced. However, it will require continual awareness by the school social worker of his/her own concerns and motivations and their role in the process.

In view of court rulings in favor of due process and protection of parental rights, the role of the social worker is a delicate one. The due process ruling includes an elaborate set of procedures through which parents would be informed and involved in every step of the way in working with schools toward an appropriate educational placement for their children.[80] The questions about placement, about the proper procedures by which such decisions should be made, at what point the parent should be involved, and how this educational plan for the child is treated in his records could involve an advocacy position on the part of the school social worker. From my viewpoint, I would hope that the rights of the parent and the child would be respected by the school. The school needs to involve the parent in planning and, where necessary, the worker may need to be an advocate.

A more complex question is to whom the social worker is accountable. Sometimes assuming the advocate role could cause the worker to place himself in an awkward situation while attempting to serve both the parent and the school. This poses a serious values' conflict, one with some dangers and risks regardless of the choice which is made. As Brager pointed out, the social worker "must then walk the tightrope between conflicting demands."[81]

Elsewhere Mary McCormick concluded, "Risk ... is taken in one form or another whenever a professional man or woman believes that human welfare is threatened and that his involvement will somehow alleviate or remove that threat. Commitment like this is serious, demanding and often frustrating."[82]

CHAPTER VIII

The Least Restrictive Environment
Its Implementation and School Social Workers

Mary Lou Rogoff and Robert Constable

The broad goal of P.L. 94-142 is to assure that all children receive equal educational opportunity regardless of handicapping condition. In order the meet this goal, the law requires handicapped children receive their education in the Least Restrictive Environment. The concept of Least Restrictive Environment is delineated in the federal rules and regulations. These rules and regulations require:

> that special classes, separate schooling or other removal of handicapped children from the regular educational environment occurs only when the nature or severity of the handicap is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.[83]

Prior to the passage of P.L. 94-142, the right to be educated in the Least Restrictive Environment was recognized by the same landmark court decisions which acknowledged the handicapped child's right to an education.[84] "Among the alternative programs of education and training required by statute to be available, placement in a regular school class is preferable...to placement in any other type of program of education and training."[85] The principle is based on recognition of a variety of learning environments in which the child can be educated. For the handicapped child, there is a continuum of placements ranging from the least restrictive (that is, being placed in a regular classroom setting with ample opportunity to interact with nonhandicapped children) to the most restrictive setting which might include a special school or even a nonpublic program such as an institution with very little, if any, contact with nonhandicapped individuals.[86]

The federal regulations mandate a continuum of alternative placements to be available through the local educational agency to meet the needs of handicapped children for special education and related services. The continuum must include alternative placements such as instruction in regular classes, special classes, home instruction and instruction in hospitals and institutions. Schools must also make provision for supplementary services, such as a resource room or itinerant instruction to be provided in cooperation with regular class placement.[87] In response to the court decisions and the federal regulations, states have established their own continua of placement alternatives.

The Least Restrictive Environment amounts to a right to be educated with children who are not handicapped to the maximum extent possible. Factors idiosyncratic to school districts (such as organizational arrangements, technological differences in delivery systems, agency jurisdictional problems and/or lack of adequate local, state or federal financial support) may not be considered as reasons for abrogating this right.[88] Ultimately, school districts bear the responsibility for providing the Least Restrictive Environment appropriate for each of their handicapped children.

We may use Illinois as an example of the continuum of services developed from the Federal Regulations. A list of program options includes:

1. Standard Program with Modifications--the child receives his/her basic educational experience through the standard program. However, these experiences are modified through:
   a. Additional or specialized education from the teacher
   b. Consultation to and with the teacher
   c. Provision of special equipment and materials
   d. Modification in the instructional program (e.g., multi-age placement, expectations, grading, etc.)
2. Alternative Standard Program--the child receives his/her basic educational experiences in a standard program whose current content and educational methodology have been substantially changed. Such changes shall occur when the special education needs of a proportionately large, identifiable segment of the school population are not otherwise being met.
3. Standard or Alternate Standard Program with Resource Programs or Related Services--the child receives his/her basic educational experiences through the standard, or alternate standard, program. However, these experiences are augmented by one or more resource programs or related services.
4. Special Program--the child receives most of his/her basic educational experience through an instructional program in a special class, which is largely self-contained, or in a special school.

a. Inclusion in those parts of the standard program which are appropriate.
b. Provision of related services as needed.

5. Cooperative Program--the child receives most of his/her educational experiences through either the standard or the special program of the public school. However, this is supplemented through work experience programs or shared agency involvement.
6. Home and Hospital Program--the child who is eligible for either standard or the special program, but who is unable to attend such programs, receives instructional or resource programs or related services in his/her home or in the hospital.
7. State Operated or Private Program--the child whose exceptional characteristics are so profound or complex that no special education program offered by the public schools can adequately or appropriately meet his or her needs is referred to either a state operated or private facility.[89]

The placement of handicapped children in the Least Restrictive Environment has considerable benefits provided that school personnel can adjust to new procedures and adaptations. If, for example, developmentally disabled children are to be given the opportunity to acquire, maintain, and improve their life skills, they may do this best by being placed with the main flow of students in the regular school building. Such placement could also allow their neighborhood groups to be more accessible to them. One of the most serious problems in placing handicapped students in specialized school settings is that these settings are frequently quite a distance from home and the students feel isolated from their neighborhoods and regular school environments.

Many handicapped children, as a result of these fundamental policy shifts, could spend all or a part of their school hours with nonhandicapped children. The process of integration of such children, where appropriate, with nonhandicapped peers based on an on-going, individually determined educational planning and programming process[90] has been popularly called "mainstreaming." The philosophy of returning and maintaining a variety of students in the regular school building will necessitate adapting the environment of the school and the classroom to meet the special needs of handicapped children. Certainly, regular students will be involved as they are part of the environment in which the special student will reside. Since all children are unique, the ultimate payoff should be more effective educational environments for everyone. However, this new emphasis on more flexible programming coupled with larger class size may also create confusion, uncertainty, fear, and anxiety among school personnel, particularly the teaching personnel. The school social worker, who has traditionally dealt with socio-emotional factors which retard or promote the process of education, would have much to offer in helping education personnel learn to understand and adapt to this new challenge.

There are three forms of integration of handicapped children with their nonhandicapped peers: temporal integration, instructional integration, and social integration.[91]

Temporal integration refers to the amount of time the handicapped child spends with normal peers. The underlying assumption is that the greater the amount of time handicapped children spend with normal peers, the more positive will be their social and/or instructional growth experience. Handicapped children need time and participation with normal children to acquire essential socialization skills. Time spent with nonhandicapped peers is not necessarily formal instructional time. It may involve the lunch room, the playground, a shared field trip, or other jointly shared activities. Such programming also provides an opportunity for nonhandicapped children to relate informally with handicapped children and form friendships. Temporal integration is more than developing detailed schedules for both groups of children. It involves an informed estimate of how the groups of children will interact in informal situations. Occasionally, some preparation may be necessary with both groups and some monitoring of the experience is usually necessary.

Instructional integration refers to the extent to which a handicapped child is integrated into the regular classroom instructional environment. Three conditions of compatibility must exist for instructional integration to occur. These conditions are:

(a) compatability between the child's needs and the learning opportunities that are available in the regular classroom;
(b) compatibility between the handicapped child's learning characteristics and educational needs, and the regular classroom teacher's ability and willingness to modify instructional practices; and
(c) that regular and special education personnel provide the handicapped child with an appropriately coordinated and well articulated educational program.[92]

One of the roles of the social worker in helping to meet conditions for instructional integration is to alert the teacher to the child's basic needs so that these can be met within the learning environ

ment. One example might be offered through a volunteer parent, a classmate, or an older student acting as tutor. The social worker in cooperation with the teacher might suggest various resources readily available.

Other examples might be the child who needs a quiet place, a child who requires an opportunity for verbalizing, or the child who could benefit from more direct interaction with classroom materials or classmates. The social worker may help the teacher determine how he/she may provide these opportunities within the classroom.

Social Integration refers to the placement of handicapped children in situations where informal relations and friendships with their normal peer group are possible. Qualities of social integration may be expressed in terms of psychological and physical closeness, interactions with peers and the assimilation of acceptance of the handicapped child in the regular classroom. In facilitating the handicapped child's social integration into the regular classroom, the social worker's knowledge and expertise in social and emotional areas can be the key to maintaining the child in an integrated environment.

The school social worker may assist the teacher in planning the physical location of the children within the classroom. Using the social worker's knowledge of patterns of interactions, the students may be regrouped to make the climate more conducive to learning for all the students in the room. The social worker may be asked to utilize his/her skills to work directly with all of the children in the classroom in order to help them to accept the handicapped child and to assist in the integration of that child into the group. The three basic formats which the social worker may use are: (a) an educational format--films, bibliotherapy, or discussion of specific handicaps; (b) an affective educational approach to help the children know and understand each other better so that they can function more comfortably as a group; and (c) a problem solving approach through formal classroom discussions of problems which affect students. The social worker can enable the classroom teacher to develop the necessary skills to use these formats in the classroom by modeling and/or co-leading these groups with the teacher.

Assessment of the School Environment

The nature of a handicapped child's academic and social needs will greatly influence the appropriate integration opportunities which can be provided. In addition to the physical restructuring of the educational setting in order to permit the integration of the maximum number of handicapped students into the classroom environment, there also will need to be adaptation of other elements of the educational environment for the same purpose. This restructuring process appropriately starts with assessment of the current functioning of staff in terms of their present capacity to create a climate for learning and their potential to provide this for all students. As strengths and weaknesses are evaluated, all available resources, including those of family and community, can be mobilized to assist schools in accomplishing the task that P.L. 94-142 has set forth. The unique skills and abililities of the school social worker will be called upon as never before and he/she must be ready to face the challenge. Most of all, the social worker, who creates awareness of the valuable resources he/she can offer through active participation in all educational processes, can make a significant contribution.

If, in the social worker's judgment, the child requires an individual treatment relationship, he/she must communicate to the staff the needs of the child, the problems to be addressed, and how his/her activities on the child's behalf can assist other team members.

School social workers have many skills to employ in assessing the degree to which environmental factors in the classroom and school milieu are effective in meeting the needs of handicapped children. The social worker can make a careful appraisal of the child's environment including the various situational and interactional processes in these behavior settings. Social workers need to shift their thinking from one child and one teacher to one child in many different groups and classroom situations, and how that child relates to the different students and teachers as well as how the different students and teachers relate to the child. The social worker needs to determine the feelings of regular students toward the special student and how these, in turn, affect the handicapped child, who may have previously experienced many negative feelings from peers and adults. As the social worker assesses the total environment of the handicapped child, he/she must attempt to understand the dynamics of all groups within which the child is functioning and how they interact to influence the child. These groups can enhance or impede the handicapped child's potential for change. The possibility of providing alternative group experiences within the school also may be considered. The social worker can appraise these different situational factors and assist not only the handicapped child but the other students in the involved groups. He/she must use a variety of

skills which involve understanding individual personalities and the effect of the interactional processes upon each person involved.

A school social worker can also effectively utilize student groups within the classroom to enhance the teacher's capacities as a group leader. Groups can be used for many diverse purposes. As problems arise, the social worker can model some of these groups, such as discussion groups, for the teacher. Social workers frequently need to consider the option of a group setting as an appropriate method to deal with students' social and emotional needs.

Consultation with the Teacher

Consultation with the teacher and other professionals is also a relevant means for adapting the environment to better meet the special needs of handicapped children. A social worker needs to take time to develop an empathetic, supportive, and trusting relationship with the teacher, and to become knowledgeable of the situation with which the teacher is dealing. The social worker needs to listen to the teacher's perception of the situation, to be aware of the teacher's strengths and sensitive to his/her personality, and to be aware of the total educational milieu within which the teacher is functioning. It is important that social workers become knowledgeable about the educational process so that his/her unique skills and understanding of human interaction may be properly applied within the context of the educational situation. As an expert in social functioning, the social worker will be able to offer the teacher skills and techniques which will assist him/her in classroom management and dealing with individual behavior.

When the Placement Doesn't Work

As the social worker appraises the handicapped child's total milieu, it may become apparent that environmental factors cannot be restructured to meet the needs of this child. If the available resources of the regular classroom and teacher are not sufficient to meet the child's needs adequately, then retaining the child in what had been heretofore considered the Least Restrictive Environment might have potentially negative consequences. For example, if the child's relationship with the regular teacher or classmates has reached a point where mutual trust and working relationships are no longer possible, the staff may conclude that the child needs part or full-time special class placement for a while. When a child requires an alternative placement, the social worker's task as a member of the team could involve liaison planning for smooth transition and provision of necessary resources.

It is essential to explore the child's and the family's feelings about alternative placements. The social worker then needs to work with the other staff personnel to find the most appropriate available program. The social worker's support and understanding can be key factors in enabling the handicapped child and staff to adjust to the reality of an alternative situation. If a child needs to spend time in a specialized setting, the social worker may see the child individually as needs dictate. The social worker also may work with the teachers in helping them to understand how this child functions and how to deal with his/her needs. It can never be stressed too frequently that follow-up services are essential to child, family, and teacher.

Work with the Family

In addition to evaluating the handicapped child's educational environment, the social worker will have primary responsibility for assessing the nature of the child's interactions within the family environment. This involves understanding the family's expectations and their methods of child rearing and determining whether these are compatible with the child's effective functioning in his current school placement. A social worker can examine the flexibility of the family and child to the changes necessary. The role of the social worker can be a vital factor in mobilizing the strengths of the family to help their child adjust to his handicapping condition and his subsequent school placement. It also is important to evaluate the child's relationship structures outside of the immediate family context. For example, babysitters, neighborhood, and peer group relationships may be important factors affecting the child's adjustment. The social worker needs to understand how the handicapped child functions in each particular group and the role or roles he/she tends to choose. All of these factors will affect his/her adjustment in the classroom and total educational environment.

Work with the Pupil

The handicapped child may express both covert and overt resistance to a plan which introduces new and different realities to deal with. In this event, it may be very helpful for the school social worker to provide a support base for the child to help him/her feel more comfortable with himself/herself in the new situation. In some cases, the social worker may need to work with the child on a regular basis over an extended period of time. Children with behavioral and emotional problems may need extensive counseling, which a school social worker could provide.

School social workers have a special opportunity to make the educational process viable and

beneficial to children. Let us be aware of the challenges, sharpen our skills, gather our strengths and become truly a part of the mainstream of American education. Of course, there are those who will say that the task is impossible and the cost cannot be borne. But, on the other hand, there are rights which cannot be denied. The issue for social workers is not so much whether the intent of the law should be translated into practice but to what extent the social worker will be able to participate in this process.

CHAPTER IX

Resource Acquisition and Community Coordination

Robert Constable and Mary Lou Rogoff

The establishment and implementation of the right to a free, appropriate public education for all handicapped children regardless of disablity, places the school in the position of locating and coordinating the variety of resources which will make such a placement possible. Some children may be able to function quite well in a regular class with only the provision of periodic consultation to the teacher and possibly some special equipment. Others will require supplementary instruction available in the district, ranging from a few hours a week to a total exposure to special education. Still others will require the coordination of educational resources outside of the district. Finally, there will be a group of children whose needs cannot be met by a school district or intermediate unit resources. These children may need resources which go beyond the traditional capabilities of the school. They may need a total institutional setting, with the school district taking responsibility for the costs entailed. This chapter will attempt to explore the implications of P.L. 94-142 for the school social worker's role of service coordination through the school and the implications of such coordination for the overall delivery of services to handicapped children.

At the present, it is too early to foresee the ultimate effects of establishing the right to an education for the nation's handicapped children. In an era of scarce resources for both regular and special education, school systems can be expected to take a conservative stance. Parents' groups, on the other hand, can be expected to be expansive. The courts ultimately will need to decide what constitutes an educational service and where boundaries of the obligation of the school to the child lie.

Several intervening realities may be noted. First, with the advances of modern medicine, the number of severely disabled persons needing considerable help in carrying out normal functions has increased dramatically.[93] The population of adults with severe disability has increased significantly over the last ten years and indicates a trend which may be applied to the broader population. These persons need continuous environmental support to function and will certainly need considerable support to receive an education according to their capacities. On the other hand, the loosening of family ties, the prevalence of homes where both spouses are in the work force, particularly at the child-rearing ages,[94] and the growth of single-parent families,[95] together with the movement away from institutionalization, make continous care arrangements quite problematic in many cases. Furthermore, the caring for a handicapped person places enormous pressure on the family unit. Consequently, the family itself often requires support from the community in order to continue to care for the handicapped individual without a breakdown of its own functions or the functions of one of the family group members. Whatever legal entitlements emerge from P.L. 94-142, the needs of the child and family for complex and individually-constructed supportive resource systems are evident. Schools will need professionals capable of coordinating such supportive resource systems in the community if they are to sponsor noninstitutional educational placements of handicapped children which economics and our own preference for family living arrangements would ordinarily dictate. A new role for the school social worker and a new concept of service delivery from the school will be an inevitable result of such circumstances.

The need for coordination and service integration is heightened by P.L. 94-142. Such need is dictated both by the belief that it is better that a handicapped child remain with his/her family, and by simple economics, which makes remaining at home a less expensive educational alternative. Given the scarcity of regular and special education resources within school districts, the school faces the complex problem of bringing children and educational resources together in an appropriate environment and maintaining a support system. Since a variety of resources are being brought to bear on an individual child, the management problem is quite different from the traditional model of educational administration, involving a building, an administrative hierarchy, a faculty, a group of pupils, equipment more or less in one place and transportation primarily from home to school. With the decentralization of handicapped children throughout the school system and the corresponding need for decentralization of specialized personnel and equipment, the logistical problems faced by the school district or intermediate unit are complex. Proper utilization of school resources demands that the services be coordinated over a large area, that the services be integrated according to the needs of each child, and that there be accountability to assure that the services promised in the Individualized Education Program actually be delivered. These requirements may best be met by:

(a) vesting individual "case managers" with responsibility for integration of services at the level of the individual, and (b) developing overall structures which coordinate these services efficiently.

Coordination and Integration to Resources Within the School District or Involving Other School Districts

Internal coordination and integration of services involving only resources available within the school is partially covered elsewhere (see Chapters V and VIII). In general, the multidisciplinary team will need to deal with its own differences and specialty interests in the context of the needs of the child and agreed-upon goals and objectives. The team, however, does not just happen. It is itself a creation of the school district, a matching of persons having particular professional skills with children having particular needs. Assuming the school will use its own resources, when possible, the logistics of coordination will require: (a) the development of shared resource banks within the district or intermediate unit, (b) a sufficiently open organizational system to use these resources fully and equitably, and (c) considerable creativity on an individual level to deal with the inevitable gaps which will arise between resources and needs. An example of one such resource bank may be seen in Figure 1.

Figure 1
A Sample Resource Inventory

Program type	Staff	Material resources	Instructional interventions	Interagency services
Regular classroom	Teachers	Regular curriculum guides	Diagnosis Physical health	Human resources
Regular classroom with direct or indirect assistance(provide	Consulting teachers	Special curriculum guides	Intervention	Mental health Vocational rehabilitation
Itinerant	Itinerant teachers	Special equipment	Treatment	Family and child services
Crisis intervention	Methods and materials and curriculum specialists	Special instructional materials	Therapy	Natural resources Recreational
Resource room	Resource room teachers	Diagnostic material	Training	Lifetime sports
Self contained	Special therapists Audiologists		Programming	Intermediate school district
Multisystem unit	Speech therapists Physical therapists		Regular education	Direct services Indirect services
Special center	Occupational thera. Recreation thera.		Special education	State department of education
Private center, school	Music therapists Medical consultant		Reevaluation	Instruction Special educat.
Homebound/hospital	Other		Followup	Vocational rehabilitation
Residential	Support teachers Reading Math Other		Staff development	Federal program Other
		Other resources		Other
	Paraprofessionals	Curriculum modification		Special hospitals Special clinics
	Counselors	Intraschool differentiated staffing		Community service organizations
	Visiting teachers			
	School social workers School psychologists			

The interim period, prior to the actual placement, is the period when a network of resources, involving teachers, supportive personnel and possibly equipment and transportation, is assembed. Until such a placement is put together, the child has the right to be enrolled in a public school program. It is not always easy for the handicapped child to gain admittance to a particular school. School administrators often have exhibited considerable resistance to such placement. School officials often feel that they do not have room or that the same services could be provided at a different school. Placement out of the district is even more complex. However, when there is a scarcity of certain types of resources, there needs to be a structure of administrative operations established out of whatever sponsoring unit is appropriate so that such placements can be accomplished easily for children. In either case, efficient utilization of existing resources will demand administrative structures and procedures which expedite the use of shared resources among school and which encourage the creative use of existing formal and informal resources within the school. One of the people best suited to carry out this type of individualized service integration with the school, parent, and child, is the school social worker.

Coordination and Integration of Resources Outside of the School

Many children will not be able to profit from what the school offers without the development of comprehensive, supportive systems outside of the school. In fact, the decision to pursue residential care will most often hinge on the availabilities and quality of resources and equipment. Collaboration with the parents is, of course, the key to such coordination of resources outside the school. What must be recognized is that the family unit itself often will need assistance from a variety of formal and informal resources in the community and that the success of the placement will depend on the delivery of such assistance.

Resources in the community can be divided into two groups: (a) those services available from formally constituted organizations, often purchased by either family or school, and, if not purchased, subject to complex eligibility determinations for entitlement, and (b) informal, helping networks of neighbors, community people, relatives, members of church and civic groups, local merchants, and other school children who may volunteer to help in a variety of ways.

The family often may need assistance from formally constituted organizations and social agencies in the community. With family resources often inadequate and entitlement to service complex, the family usually faces a dilemma in getting the services it needs to continue under the strain of caring for a handicapped child. Medical services, counseling services, psychotherapeutic services, homemaker services, financial assistance, all afe characterized by an extremely segmented and bureacratized service delivery system. Fragmentation and bureaucracy is, in fact, characteristic of most human service systems. Removal of barriers for the child will often necessitate an advocacy posture on the part of the social worker, finding resources to pay for expensive services and helping the family to receive services to which it is entitled. Fragmentation of resource systems makes it particularly difficult even for the most sophisticated, resourceful, and financially well-established parents to get the resources they need to care for their handicapped child. Often parents are not even aware of the existence of such resources. The social worker's investment of time in informing parents, removing barriers to service obtainment, and helping parents to utilize services has a high payoff in the child's adjustment to a learning situation.

It would be unrealistic to assume that formal organizations by themselves will be able to meet the complex needs of handicapped children and their families. The social worker may locate and help the family communicate with a variety of informal, helping networks which may exist in a community. Possible uses of such networks can be almost limitless. The social worker must seek out and find these networks and maintain an ongoing consultative relationship with them, so that they don't become disappointed or confused at the initial response of the handicapped child and/or his family. The authors have used volunteers, policemen, and a wide variety of other persons in many ways to provide structure, an element of caring, and vitally needed help for the handicapped child and his family. It is important to recognize that at least two needs are being met--the need of the child and the need of the volunteer to see himself/herself as a person who genuinely cares about others. Sensitivity to both sets of needs is crucial to success.

With the school as the center for coordination of resources, the possibility increases that formally organized networks of agencies may act together to meet the variety of needs which arise with handicapped children. Initially, organized networks are more likely to spring up in newly sububanized areas with rapidly escalating service needs; thus, the segmentation of service common to

older communities with long established agencies is bypassed. Service networks provide an indication of what may be possible, even with a scarcity of resources.

A model of coordinating community resources to provide services for handicapped children in the schools has recently been implemented in the south suburban area of Chicago. This "central services team" model involves public and private agencies and is focused on a population of 40 students with severe behavior disorders who have been placed in a special public school setting.

This model was established in September, 1977, under the umbrella of the Health Systems Agency, in an agency called "Health Partners." The central services team is composed of representatives of the SPEED (Speed Provides Exceptional Educational Development) Special Education Cooperative, The SPEED Alternative School, the Illinois Department of Mental Health and Developmental Disabilities Child and Adolescent Coordinator, the Illinois Department of Children and Family Services, the Family Service and Mental Health Center, the Cook County Juvenile Court, Rich and Bloom Townships' Youth Commission, and the South Suburban Special Recreation Association. Representatives of the team meet once a month and make assessments of students in the SPEED Alternative School and then determine which services are needed. The liaison worker then proceeds to refer the family to the appropriate agency with cooperation of the agency representative on the team. This team approach has been successful in acquiring more service for the students as well as enhancing communication and cooperation between community agencies. The services team has focused on students in a special education cooperative school, but this also seems workable on a local district level. The team expects to work with the member school districts within the special education cooperative during the next school year.

The coordination and services integration of the social worker in the implementation of P.L. 94-142 adds a new dimension to practice, that of involvement in case management. In this respect, this model of social work practice which is currently being proposed for the health services field may be broadly applicable to school social work practice. According to Robert Morris, the case management concept has the following rationale:

> The social work profession would consider itself responsible for the creation and management of social environments. In these social environments, psychological and other clinical treatment services would be given but the profession would emphasize management of the social environment.[96]

While some of what Morris proposes for the health care system would not fit the delivery system as envisioned under P.L. 94-142, the shift toward "management of the social environment" has a clear applicability to the position the social worker will have to assume in order to make education a possibility for the nation's handicapped children. It is an expansion of the traditional role of the school social worker but an expansion out of what has been a long-standing focus. The concept does not, however, imply that services would be less individualized or that the social worker would give up clinical aspects of his/her role, but that the role itself would be broader in its impact.

Changes in Overall Service Delivery to Handicapped Children

It is perhaps too early to forecast what the ultimate effect of P.L. 94-142 will be on the delivery of services to children. The provisions of the law have yet to stand the test of litigation, and when that test is applied, a more clearly defined picture will emerge. It is obvious that the development of the school as a service system that deals with the educational needs of all handicapped children will have a profound effect on the current provisions for and providers of service to handicapped children. However, exactly what kind of an effect it will have is still unclear. It is equally unclear what balances and compensatory mechanisms will arise in the system to accomodate this change. It may be useful at this point to hypothesize where change will probably occur in the delivery of services to the handicapped.

The first change is that the school has the potential and even the probability of becoming the center of services to handicapped children. The public school carries important functions in our society. Going to school is an expected part of growing up. The right to an education is now explicitly enunciated for handicapped children. This right may now be exercised in a normalized, non-institutional setting. The school does not carry the stigma or the problem of residual access to resources with which child welfare and institutional care have long struggled. The utilization of the Individualized Education Program makes an accountable delivery system possible. With the parents serving as collaborators, they are also more likely to be allies. Parent groups represent a potentially

powerful alliance in support of service development and in support of an overall increase of resources directed toward the schools. No other human service system has ever had such a clear opportunity for its clients to effectively support its provision of services. The ingredients of the situation combine to present a strong probability that the school will become such a center for services to handicapped children, that other services eventually would adjust their own service provision and resources to this emergent reality. The need for other services will not be diminished; rather, these needs should increase since the school will create a demand for them. Other services, however, will need to shift the focus of their provision of services from institution to community.

The opening of services for handicapped children in the school as a right should intensify the movement toward the deinstitutionalization of many children. It should result in a new relation between school social work and child welfare. The shift from residual to institutional provision of services to the handicapped, as a right, and as an expected part of modern life, may be evident.

The development of public educational services for all handicapped children necessitates the parallel development of supportive systems to sustain the child and his/her parents in such a community placement. The necessary parallel development of these systems will hopefully involve both public and voluntary sectors, with reliance on informal and private resources as well as the public sector. The potential costs of a totally public service delivery system could be astronomical and these high costs may result in an upper limit to service provision. The cost of services to the handicapped population might be such that, in a period of scarce resources and a shifting, perhaps declining tax base, services to nonhandicapped populations simply could not be offered.

These issues must be faced and grappled with over the next few years. We face a period of enormous growth as the profession begins to assimilate a new model of practice and as a service delivery system for handicapped children emerges which hopefully will be a better one than that which we have known. It is hoped that P.L. 94-142 will lead the way to an increased awareness of the needs of all children, not simply those covered and defined in the present law.

APPENDIX A
Sample IEP Forms

(South Metropolitan Association)

INDIVIDUAL EDUCATION PLAN SCHOOL YEAR 19__-19__

PUPIL'S NAME _____ PUPIL NO. _____

E.A.S. REVIEW DATE ___/___/___ M/F SEX BIRTHDATE ___/___/___

CODE NO. TYPE OF HDCP. _____ CODE NO. PROGRAM LOC. _____

PROJECTED DATES FOR SERVICES: _____ INITIATION _____ DURATION

MAJOR GOAL: _____ NUMBER _____ CATEGORY

BASELINE DATA:

PARENT APPROVAL: ☐ YES

PARENT SIGNATURE

DATE

DISTRIBUTION
- ☐ MANAGEMENT SERVICES (PINK)
- ☐ PERMANENT FILE (WHITE)
- ☐ CUM/IEP IMPLEMENTOR (CANARY)
- ☐ PARENT (GOLDENROD)

ADDITIONAL COPIES:
- ☐
- ☐
- ☐

SUB-GOAL	PERFORMANCE OBJECTIVES	STRATEGIES OF INSTRUCTIONAL-PLAN IMPLEMENTOR	ASSESSMENT TECHNIQUE AND ACHIEVEMENT CRITERION	ACHIEVEMENT DATE		RESPONSIBLE PERSON	SERVICES/ RESOURCES	REASSESSMENT DATA		
				EXPECTED	ACTUAL			DATE	P/NP	REQUIRED E.A.S.
CATEGORY NUMBER	BEHAVIOR OR ACTION EXPECTED UNDER SPECIFIC CONDITIONS	INSTRUCTIONAL TECHNIQUES, MEDIA AND MATERIALS TO BE EMPLOYED TO REACH OBJECTIVE	METHOD BY WHICH OBJECTIVE WILL BE MEASURED, AND THE EXPECTED LEVEL/DEGREE OF PERFORMANCE							GOAL MODIF. / NEW GOAL
							☐ PHYS. THER. ☐ PSYCHOL. ☐ SPEECH ☐ AUDIOLOGY ☐ OCC. THER. ☐ COUNSL. SER. ☐ MEDICAL ☐ PAR. TRAIN. ☐ SOCIAL WK. ☐ TRANSPRTA. ☐ REMED. P.E. ☐ OTHER ☐ INTEGRATN INSTRUCTN. ☐ MIN/DAY TRANSPRT ☐ MIN/DAY RECREATN ☐ MIN/DAY NUTRITION ☐ MIN/DAY			

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☐ Multidisciplinary Staffing Report
☐ Individualized Education Program
☐ Annual Review

Conference Date: _____
☐ New ☐ Change
☐ Continuing

Student Name _____
Address _____
_____
Parents _____
Address (if different) _____

Birthdate _____
I.D. # _____
Phone # _____
Joint Agreement:
☐ ECHO ☐ Southwest
☐ Eisenhower ☐ SPEED
District: _____
School & Class _____
_____
Teacher: _____

Exceptional Characteristics:	Primary	Secondary
Trainably Mentally Handicapped	☐	☐
Educably Mentally Handicapped	☐	☐
Physically Handicapped	☐	☐
Multiply Handicapped	☐	☐
Learning Disabled	☐	☐
Visual Impaired	☐	☐
Hard-of-Hearing	☐	☐
Deaf	☐	☐
Deaf/Blind	☐	☐
Speech/Language Impaired	☐	☐
Educationally Handicapped	☐	☐
Behavior Disordered	☐	☐
Other Health	☐	☐

Primary Special Education Placement:
☐ Supportive Services (less than 50%)
☐ Instructional Program (50% or more)
☐ Non-public School _____
☐ Residential Class _____
Projected Effective Date: _____
Transportation Handled By:
Joint Agreement ☐
District ☐

Projected Review: _____

PARTICIPANTS

Special Education Director (Designee)
_____

District of Residence Personnel
_____
_____
_____

Joint Agreement Personnel
_____
_____
_____

Parent(s)
_____
_____

Student _____

Teacher(s) _____
_____
_____
Psychologist _____
Social Worker _____
Speech/Language Pathologist
_____
Nurse _____
Counselor _____

Other (Specify Title)
_____
_____
_____

Purpose of Staffing _____
Justification for Placement _____
_____
Recommendations: _____
_____

The following were explained: Multidisciplinary staff conference ☐
Recommended placement ☐
Individual education program ☐

Yes No

Legal rights, including the right to object to placement, were explained and offered in writing.
I/We agree with the staff conference recommendations including placement.
I/We agree to waive to ten (10) school day preplacement period.
I/We have received a copy of my child's educational program.

Date _____ _____
Signature: Parents or Guardian

Staff Member Preparing Conference Report

(South Metropolitan Association)

Green - I.E.P. Manager
Yellow- District
White - Joint Agreement
Gold - Parent

Student_____ Date_____

Student I.D. #_____

PRESENT LEVEL OF RELEVANT EDUCATIONAL PERFORMANCE (ATTACH REPORTS)

AREA	LEVEL	TEACHER/ DIAGNOSTICIAN ESTIMATE	STANDARDIZED TEST (NAME INSTRUMENT)
Math: Computation		☐	
Reasoning		☐	
Reading: Recognition		☐	
Comprehension		☐	
Spelling		☐	
Listening Comprehension		☐	
Written Expression		☐	
Expressive Language		☐	
Receptive Language		☐	
Speech		☐	
Social Development		☐	
Pre-Vocational/Vocational		☐	
Self-Help Skills		☐	
Gross Motor		☐	
Fine Motor		☐	
Visual Perception		☐	
Auditory Perception		☐	
Other (Specify)		☐	
		☐	
		☐	
		☐	

Date of last vision screening_____ ☐ Pass ☐ Not Pass

Date of last hearing screening_____ ☐ Pass ☐ Not Pass

Date of last medical evaluation_____ Significant Findings_____

SUPPORT SERVICES Type	ASSESSMENT Pending	Compl.	Date Compl.	SERVICES Consult	Direct Service	Projected Date of Initiation	# Project Min. Per Week	# Project Wks. Per Year
Speech/Language Pathologist	☐	☐		☐	☐			
Social Worker	☐	☐		☐	☐			
Psychologist	☐	☐		☐	☐			
Counselor	☐	☐		☐	☐			
Nurse	☐	☐		☐	☐			
Reading Resource	☐	☐		☐	☐			
Minimally Mentally Imp./Resce.	☐	☐		☐	☐			
Learning Disc./Resource	☐	☐		☐	☐			
Educational Rdcp./Resource	☐	☐		☐	☐			
Behavior Disorder/Resource	☐	☐		☐	☐			
Physical Therapist	☐	☐		☐	☐			
Occupational Therapist	☐	☐		☐	☐			
Vision Itinerant	☐	☐		☐	☐			
Hearing Itinerant	☐	☐		☐	☐			
Pre/Vocational Co-ord.	☐	☐		☐	☐			
Audiologist	☐	☐		☐	☐			
Medical (Specify)	☐	☐		☐	☐			
	☐	☐		☐	☐			
Other (Specify)	☐	☐		☐	☐			
Modified P.E.	☐	☐		☐	☐			
Transportation	☐	☐			☐			

(South Metropolitan Association)

Student_____ I.E.P. Case Manager:_____

Student I.D. #_____ Date:_____

PARTICIPATION IN STANDARD EDUCATION PROGRAM

Full time, Except Support Services ☐

Subject	Projected Date of Initiation	Minutes Per Week	Weeks Per Year	Projected Duration
Standard P.E.	_____	_____	_____	_____
Art	_____	_____	_____	_____
Music	_____	_____	_____	_____
Reading	_____	_____	_____	_____
Math	_____	_____	_____	_____
Spelling	_____	_____	_____	_____
Other Language Arts	_____	_____	_____	_____
Social Studies	_____	_____	_____	_____
Science	_____	_____	_____	_____
Other (Specify	_____	_____	_____	_____

ANNUAL GOALS:

	GOAL	IMPLEMENTER
1.		
2.		
3.		
4.		
5.		
6.		

I.E.P. INSTRUCTIONAL OBJECTIVES

PAGE_____ OF_____

School Year_____

Evaluation Period: From_____

To_____

Student:_____ ANNUAL GOAL_____

I.D.#_____

I.E.P. Implementer_____

I.E.P. Case Manager_____

Title_____

SHORT TERM OBJECTIVES	METHODS & MATERIALS	EVALUATION (Specify Method, Criterion and Schedule for Measuring Progress)	DATE OBJECTIVE MASTERED

(South Metropolitan Association)

(Joliet Public Schools)

Individual Education Plan

Student's Name_____ Birthdate_____

IEP Manager's Name_____ School/Program_____

Planning Conference Date_____ Date for Review/Revision_____

SERVICES TO BE PROVIDED FOR CURRENT YEAR

Type of Services	Date Begun	Time/ Week	Length of Service

JUSTIFICATION FOR PLACEMENT CHANGE

PRESENT LEVELS OF PERFORMANCE

Academics:	Motor:
Social Behavior:	Speech/Language:
Self-Help:	Extent of Regular Class Participation:

LONG RANGE GOALS

PARTICIPANTS:

1._____ 5._____

2._____ 6._____

3._____ 7._____

4._____ 8._____

RECOMMENDATIONS/MANAGEMENT PLAN: (To be completed during staffing)

(Editor's Note: The short term goals may be listed here.)

INDIVIDUALIZED EDUCATIONAL PROGRAM

PARTICIPANTS	TITLE

NAME _____
ADDRESS _____
PARENT/GUARDIAN _____
BIRTHDATE _____
MDS/IEP Conference Date _____
SCHOOL/GRADE _____
CASE COORDINATOR _____

EDUCATION PERFORMANCE (Areas to include: processing, academic, self-help, vocational, psychomotor, social & behavioral)

Test Information Name of Test	Results	Date	Examiner

Observation Information	Observer

(River Forest Public Schools)

EDUCATION INSTRUCTION

STUDENT _____

YEAR _____

Special Instruction Placement:

_____

Special Support Services to be Provided:

_____

_____

_____

_____

Regular Education Participation:

_____

_____

_____

_____

_____

Implementor	Amount	Beginning Date	Duration

55

Justification for Placement:

60

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(River Forest Public Schools)

STUDENT _____

YEAR _____

SCHOOL/GRADE _____

ANNUAL GOALS

	Implementor	Progress Comment

Comments:

INDIVIDUALIZED EDUCATION PROGRAM
BEHAVIORAL OBJECTIVES

STUDENT _____
TEACHER _____
MANAGER _____

YEAR _____
EVALUATION PERIOD _____
SCHOOL/GRADE _____

Goal for the Year: _____

Present Level	Objectives	Evaluation Criteria/Procedure	Date Accomplished	Progress Comment

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(River Forest Public Schools)

HINSDALE PUBLIC SCHOOLS
HINSDALE, ILLINOIS 60521

Dear District 181 Parents:

In line with recent legislation's ever increasing efforts to better serve all school children, we would like to tell you about the special services available in our district. Pupil Personnel Services consists of a staff of professionally trained social workers, psychologist, counselors, and nurses with offices and a secretary in the Junior High School building, 100 S. Garfield St., Hindsdale. In addition, we have speech and language therapists, learning disability resource teachers, and others trained in diagnosis and treatment of problems which affect academic progress or healthy social-emotional development.

Referrals and inquiries about these services can be made by many sources and are provided at no cost to District 181 families. Often concerns are initiated by individual classroom teachers, but they also come from physicians, community resources, school principals, parents, children themselves, or members of each school's Student Support Team (SST), which meets twice monthly.

Consultations between parents, teacher, child and/or relevant professionals are usually the first and often the only necessary step in helping a child. If found desirable, further multidisciplinary assessment such as a Case Study Evaluation may be considered, in which case the parents' written consent is required.

Once a diagnostic understanding of the child's needs has been reached, recommendations are made and corrective/therapeutic intervention can begin, all planned with participation and approval of the parents.

Where specific special education services are found to be appropriate, there will be involvement from our special education cooperative, La Grange Department of Special Education (LADSE), in addition to District 181 personnel. Here too, parents are involved in planning. Parental written consent is requested for special education or related services. An Individualized Educational Program is required to specify the goals and objectives of the services as well as other details about the plan. Again, parents are included in the planning meetings and in the regular reviews, modifications, or termination of services.

Confidential records are kept in the PPS offices and are accesible to parents for review or modification by formal request. According to and in compliance with the Illinois Student Records Act (Sec. 50-54, f, h), any student's temporary record accumulated by PPS will be reviewed periodically and destroyed after the student has transferred, graduated, or otherwise permanently withdrawn from the school.

Child development and education is such a complex and evermore sophisticated effort, that we want to seek out and serve as early as possible every child who may need supportive service. Some of this is routinely done by our school district via community-wide preschool and first grade screenings. Much of it is done throughout the school year by our highly professional teaching staff, by Pupil Personnel Services staff, and the bi-monthly SST meetings in each school.

If your or your child have any concerns we may be helpful with, please call us at 887-1466, 8:00 a.m. to 4:00 p.m., during the school year.

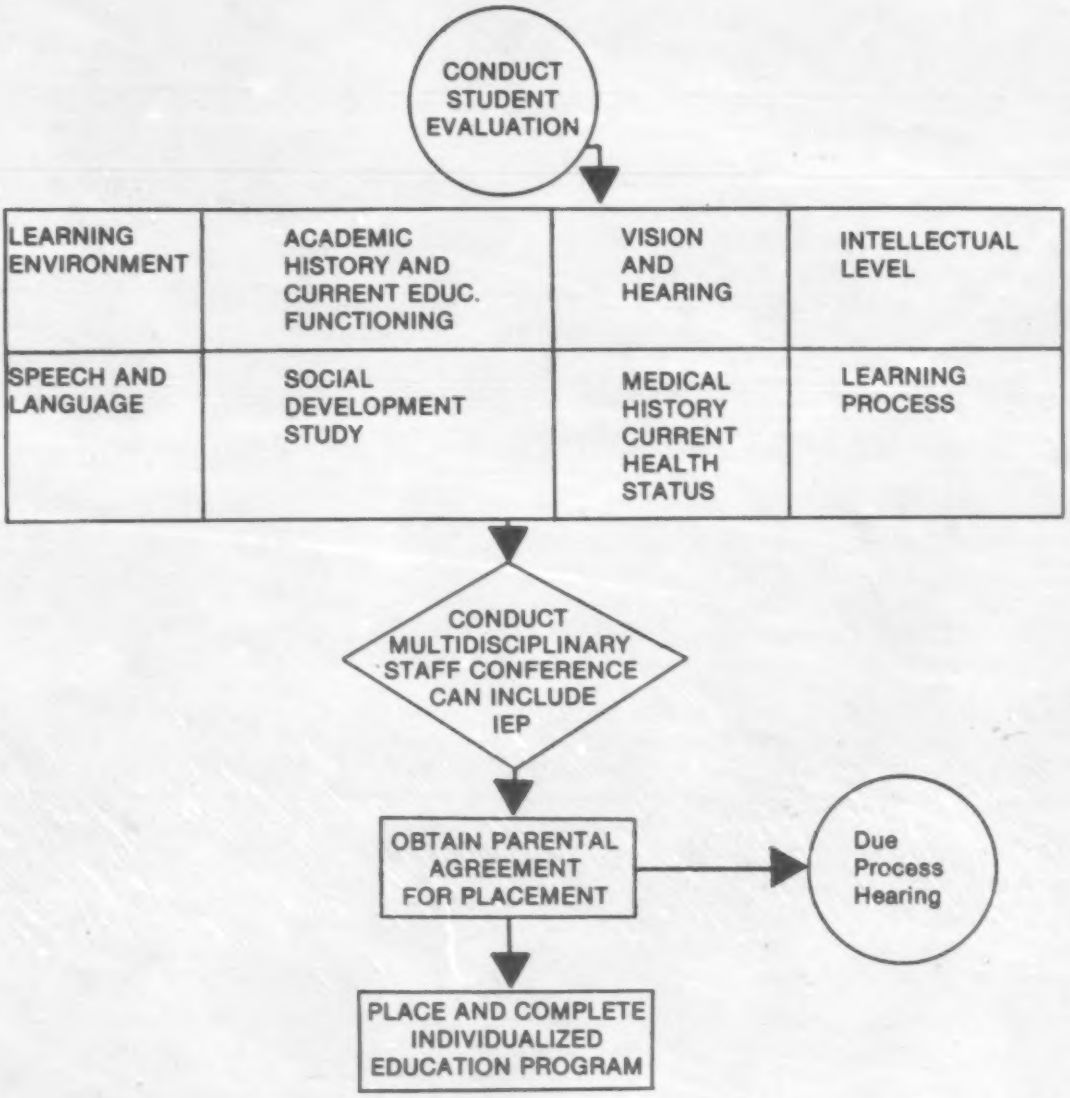
Sincerely,

Pupil Personnel Services Staff

APPENDIX B
The Identification of
High Risk Students

Table 2

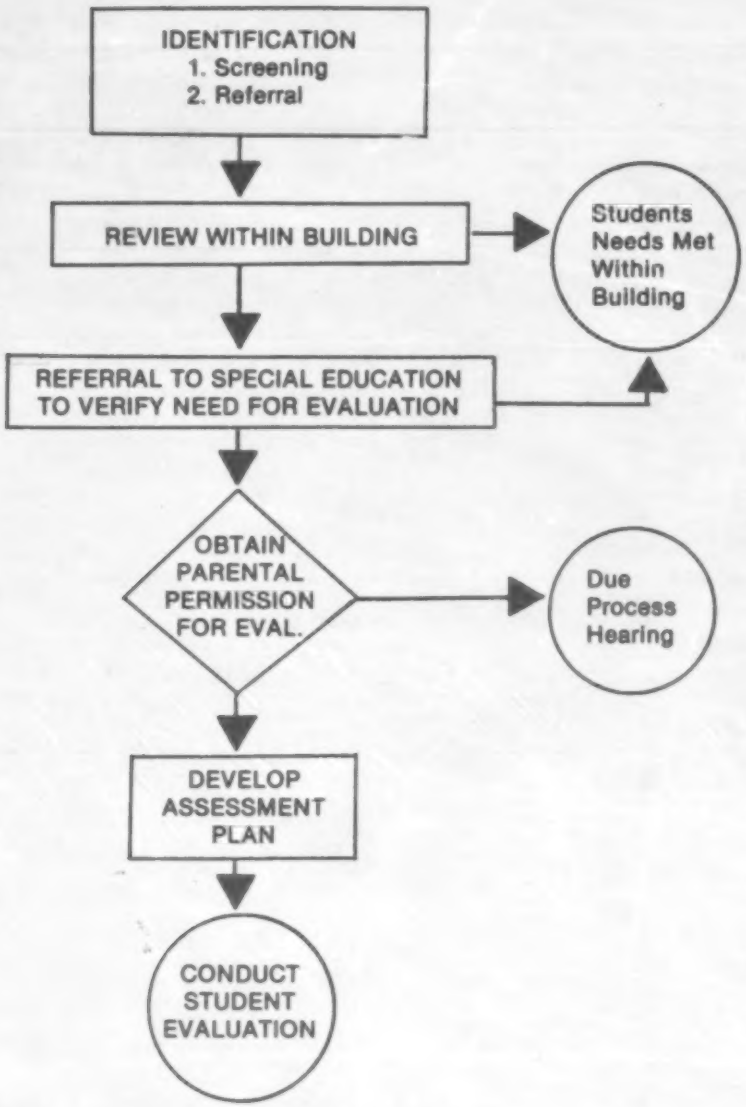
Evaluation of the Student



Margaret Van Dusen Pysh and James C. Chalfant, **Learning Disabilities Manual: Recommended Procedures and Practices**, Springfield, IL: State Board of Education, May 1978, p. 33.

Table 3

The Identification of High Risk Students



Margaret Van Dusen Pysh and James C. Chalfand, **Learning Disabilities Manual: Recommended Procedures and Practices**, Springfield, IL: State Board of Education, May 1978, p. 20.

Footnotes

[1]**Pennsylvania Association for Retarded Children v. Commonwealth of Pennsylvania**, 343 F. Supp. 279 (E.D. Pa. 1972); **Mills v. Board of Education of the District of Columbia**, 348 F. Supp. 866 (D.D.C., 1972); **Maryland Association for Retarded Children v. State of Maryland**, Equity No. 100-182-77676 (Circuit Court, Baltimore, Md., 1974)

[2]Public Law 93-112, Vocational Rehabilitation Act of 1973, Section 504, July 26, 1973. Regulations published in **Federal Register**, August 21, 1974.

[3]Public Law 93-389. Education Amendments of 1974, 20 U.S.C., Section 1413 (August 21, 1974);Public Law 94-142. Education for All Handicapped Children Act of 1975, 94th Congress, November 29, 1975. Regulations published in **Federal Register**, August 23, 1977.

[4]**Federal Register**, Nondiscrimination on Basis of Handicap, Wednesday, May 4, 1977. Part IV.

[5]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977.

[6]Public Law 94-142. Education for All Handicapped Children Act of 1975, 94th Congress, November 29, 1975. Section 4, Paragraph 19. Regulations published in **Federal Register**, August 23, 1977.

[7]**Federal Register**, 121.a, 110-114.

[8]Public Law 94-142. Education for All Handicapped Children Act of 1975, 94th Congress, November 29, 1975. 1, Part B, Section 611(1). Regulations published in **Federal Register**, August 23, 1977.

[9]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, 121a.5.

[10]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Subpart A, 121a.13 (b) (2).

[11]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, 121a.13.

[12]See Richard Weatherly, "Securing a Future for School Social Work." Paper presented at the 1977 Annual Program Meeting of the Council on Social Work Education.

[13]In many ways, the history of social legislation in the 20th century has been one of implementation shortfall. The concept, as applied to educational legislation, is discussed in greater detail by Neal Gross, "Theoretical and Policy Implications of Case Study Findings about Federal Efforts to Improve Public Schools," **Annals**, American Association of Political and Social Science, November, 1977, 434, pp. 71-87.

[14]**Brown v. Board of Education**, 347 U.S. 483 (1954).

[15]Josephine Hayes, "Annual Goals and Short Term Objectives." In Scotty Torres (Ed.), **A Primer on Individualized Education Programs for Handicapped Children** (Reston, Va.: Foundation for Exceptional Children, 1977).

[16]Public Law 94-142. Education for All Handicapped Children Act of 1975, 94th Congress, November 29, 1975. Section 612 (5) (B). Regulations published in **Federal Register**, August 23, 1977.

[17]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II. Also **Federal Register**, Assistance to States for Education of Handicapped Children, Thursday, December 29, 1977, Part III.

[18]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.1.

[19]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.5.

[20]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.5 (A-E).

[21]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.14.

[22]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.14, Comment.

[23]Note that throughout P.L. 94-142, the term "include" means that "the items named are not all of the possible items that are covered, whether like or unlike the ones named." (**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.6.)

[24]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.13.

[25]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.13 (b) (11).

[26]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121.14 (b) (1).

[27]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.530. (b).

[28]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.531.

[29]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.532.

[30]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.503 (b).

[31]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.503 (c).

[32]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.533.

[33]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.532 (e).

[34]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.343 (a).

[35]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.343 (c).

[36]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.344.

[37]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.343 (d).

[38]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, 121a.345.

[39]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.562 (a).

[40]An excellent article on mediation which goes far beyond the scope of the current chapter may be found in Claire B. Gallant, "Mediation: A Unique Due Process Procedure Which Utilizes Social Work Skills," Richard J. Anderson, Molly Freeman, and Richard L. Edwards (Eds.), **School Social Work and P.L. 94-142: The Education for All Handicapped Children Act** (Washington, D.C.: National Association of Social Workers, 1977), pp. 56-80.

[41]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.506 (Comment).

[42]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.506 (b).

[43]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.507.

[44]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.508.

[45]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a513.

[46]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.514.

[47]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.349.

[48]The format for long-term and short-term objectives is derived from: Thompson, Duane. **Writing long-term and short-term objectives: Painless Approach** (Champaign, Ill.: Research Press, 1977).

[49]**See Federal Register**, op. cit. 121a.552 (d) "In selecting the least restrictive environment, consideration is given to any potentially harmful effect on the child or on the quality of services which he or she needs." While the concept of external barriers is not highlighted in the law, it is a traditional concept in dealing with persons with handicapping conditions. Lack of focus on such tangible or non-tangible barriers would be in effect "blaming the victim" for a condition which he or she did not create.

[50]**See Federal Register**, Wednesday, May 4, 1977, Part IV, **Nondiscrimination on Basis of Handicap**, 84.33 for definition of a free, appropriate public education. Also, **Federal Register**, Tuesday, August 23, 1977, 121a.126 (b) (4) for a list of the facilities necessary in a state to meet the goal of providing full educational opportunity for all handicapped children.

[51]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.112 (b) (2).

[52]The **Emergency Rules and Regulations to Govern the Administration and Operation of Special Education**, September 1, 1978, states in Article IX, Section 9.03, paragraph 3, "the local school district shall be responsible for determining the appropriateness of the referral (for a formal case study evaluation) deciding what further action should be taken, and initiating the necessary procedures."

[53]The **Emergency Rules and Regulations to Govern the Administration and Operation of Special Education**, September 1, 1978, Article IX, Section 9.03, paragraph 3 (b).

[54]See Gerri Friedberg, Marguerite Tiefenthal, & Maridel A. Wesely. Sample Letter to District 181 parents, Appendix A.

[55]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.532 (f).

[56]**Federal Register**, Education of Handicapped Children, December 27, 1977, Part II, Subpart A, 121a.543 (c).

[57]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.343.

[58]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.126 (a). Also see comments on Section 121a.304-306, "Under the regulation implementing Section 504, any program provided to non-handicapped students must also be made available to handicapped pupils."

[59]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.343. Comment: "Requires agencies to hold a meeting at least once a year in order to review ... each child's IEP."

[60]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.506 (a).

[61]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.534.

[62]Procedures for Referral, Evaluation and Placement as interpreted by a Special Education Staff in Wisconsin may be found in the book, **M-Teaming: A Multidisciplinary Decision Making Process** by Robert Welton, Nancy Sweet, James Stowell, George Heinemann and William Terrill, Revised Edition (Elmwood, Wisconsin: Cooperative Educational Service Agency # 5, 1977). Of particular interest is a flow chart linking the requirement's of Wisconsin's mandatory Public Law 115 and Public Law 94-142 with appropriate programs developed for individual children.

[63]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.533 (a) (1).

[64]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.533 (a) (3).

[65]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.344. Two books are very useful for a better understanding of the multidisciplinary team: C.E.S.A. #5, Special Education Department, **M-teaming: A multidisciplinary decision-making process**, C.E.S.A. #5, Special Education Department, Revised Edition, 1977; Mary Sarvis and Marianne Pennekamp, **Collaboration in School Guidance** (New York: Brunner/Mazel, 1970).

[66]In summary of educational interventions with high-risk children, Heiny noted that "in short, family orientation was more powerful than the strongest forms of experimental schooling." R.W. Heiny, "Renaissance or Retreat for Special Educators: Issues to Explore Before 1984," **Journal of Special Education, 1976, 10,** p. 419.

[67]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.10.

[68]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.345 (d).

[69]Barbara Bode, "Citizen Action for Children," in **The Children's Rights Movement**, Edited by Beatrice and Ronald Gross (Garden City, New York: Anchor Books, 1977), p. 260.

[70]Barbara Bode, "Citizen Action for Children," in **The Children's Rights Movement**, Edited by Beatrice and Ronald Gross (Garden City, New York: Anchor Books, 1977), p. 261.

[71]Barbara Bode, "Citizen Action for Children," in **The Children's Rights Movement**, Edited by Beatrice and Ronald Gross (Garden City, New York: Anchor Books, 1977), p. 271.

[72]Harold W. Perry, "Up Front with the President," **Exceptional Children**, October 1977, **44**, 81.

[73]S.M. Miller, "The Future of Maximum Feasible Participation," (outline of a paper as presented at the Alumni Conference of the Columbia School of Social Work, New York, New York, May 4, 1968), 5-6 cited in **Voluntarism at the Crossroads**, Gordon Manser and Rosemary Higgins Cass, (New York: Family Service Association of America, 1976), p. 245.

[74]Alan Abeson and Jefferey Zettel, "The End of the Quiet Revolution: The Education for All Handicapped Children Act of 1975," **Exceptional Children**, October 1977, **44**, 116.

[75]Dan Morris, "Efforts to Involve the Poor in Social Action," **Social Work Practice, 1966** (New York: Columbia University Press, 1966), 164.

[76]Robert Sunley, "Family Advocacy: From Case to Cause," **Social Casework**, June 1970, **51**, 348.

[77]David Schimmel and Louis Fischer, **The Rights of Parents in the Eduation of Their Children** (Columbia, Maryland: National Committee for Citizens in Education, 1977), 103.

[78]David Schimmel and Louis Fischer, **The Rights of Parents in the Education of Their Children** (Columbia, Maryland: National Committee for Citizens in Education, 1977), 96.

[79]The Ad Hoc Committee on Advocacy, "The Social Worker as Advocate: Champion of Social Victims," **Social Work**, April 1969, **14**, 16-17.

[80]Paul A. Kurzman and Jefferey R. Solomon, "Beyond Advocacy: A New Model for Community Organization," **Social Work Practice, 1970** (New York: Columbia University Press, 1970), 67.

[81]David Schimmel and Louis Fischer, **The Rights of Parents in the Education of Their Children** (Columbia, Maryland: National Committee for Citizens in Education, 1977), 98.

[82]George A. Brager, "Advocacy and Political Behavior," **Social Work**, April 1968, **13**, 7.

[83]Mary J. McCormick, "Social Advocacy: A New Dimension in Social Work," **Social Casework**, January 1970, **51**, 10.

[84]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.550 (b) (2).

[85]**Pennsylvania Association for Retarded Children vs. Commonwealth of Pennsylvania**, 343 F. Supp. 279 (E.D. Pa. 1972); **Mills vs. Board of Education of the District of Columbia**, 348 F. Supp. 866 (D.D.C., 1972).

[86]**Pennsylvania Association for Retarded Children vs Commonwealth of Pennsylvania**, 343 F. Supp. 279 (E.D. Pa. 1972).

[87]Jefferey Zettel and Alan Abeson, "The Right to a Free, Appropriate, Public Education." In Clifford P. Hooker (Ed.), **The Courts and Education**, (Chicago: The University of Chicago Press, 1978.)

[88]**Federal Register**, Education of Handicapped Children, Tuesday, August 23, 1977, Part II, Subpart A, 121a.441.

[89]R.A. Johnson, "Model for Alternative Programs. A Perspective." From E. Meyen et. al. (Eds.), **Alternatives for Teaching Exceptional Children** (Denver: Love Publishing Company, 1975).

[90]Illinois Office of Education, **Rules and Regulations to Govern the Administrative and Operation of Special Education**, effective February 1, 1979, Article III, 3.02, 1-6.

[91]M.J. Kaufman, J. Gottlieb, J. Agard and M. B. Kucic, "Mainstreaming: Toward an Explication of the Construct." **Focus on Exceptional Children**, 1975, **7**, 4.

[92]M.J. Kaufman, J. Gottlieb, J. Argard and M. B. Kucic, "Mainstreaming: Toward an Explication of the Construct." **Focus on Exceptional Children**, 1975, **7**, 4. The mainstreaming concepts of temporal, instructional and social integration have been heavily from these authors. A further useful resource is a text on mainstreaming: Bill Gearhart and Mel W. Weishahn, **The Handicapped Child in the Regular Classroom** (St. Louis: C.V. Mosby, 1976). Also Frank M. Hewett and Philip C. Watson, "Classroom Management and the Exceptional Learner" from Daniel Duke, (Ed.), **Classroom Management** (Chicago: University of Chicago Press, 1979).

[93]M.J. Kaufman, J. Gottlieb, J. Argard and M. B. Kucic, "Mainstreaming: Toward an Explication of the Construct." **Focus on Exceptional Children**, 1975, **7** , 4.

[94]Robert Morris, "Caring For vs. Caring About People." **Social Work**, September 1977, **22**(5), 353.

[95]Since the early 1950's, more than half of married women with school-age children work. See the National Research Council, **Toward a National Policy for Children and Families** (Washington, D.C.: National Academy of Sciences, 1976).

[96]Heather Ross and Virginia Sawhill, **Time of Transition: The Growth of Families Headed by Women** (Washington, D.C.: The Urban Institute, 1975).